# 112000160302

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | ldress)            |           |
| (Address)               |                    |           |
| (Cít                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nan | ne)       |
| (Do                     | ocument Number)    |           |
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SECRETARY OF STATE SALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Registration Section
Division of Corporations

Filho Holdings I, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Manuel L. Crespo

Name of Person

Manuel L. Crespo Atty at Law PA

Firm/Company

201 Alhambra Circle Suite 1205

Address

Coral Gables, FL 33134

City/State and Zip Code

mcrespo@smgqlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Manuel L Crespo

305 377-1000

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed)

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on December 26, 2012  and assigne Florida document number L12000160302  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbre "LLLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address | Filho Holdings 1 LLC   |  |                                      |                        | _        |         |
|--|--|--|--------------------------------------|------------------------|----------|---------|
| Florida document number L12000160302  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreaution of the new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  | ( <u>Name of the Limited I</u><br>(A l   | Liability Company as it nov<br>Florida Limited Liability Cor | v appears on our records.)<br>mpany) |                        |          |         |
| A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbre LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  | The Articles of Organization for this Limited Lia Florida document number L12000160302 | bility Company were filed                                    | on December 26, 201                  | 12 and                 | assigne  | d       |
| The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbre "LLC".  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address   | This amendment is submitted to amend the follow  | wing:  |                                      |                        |          |         |
| Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address   | A. If amending name, enter the new name of   | the limited liability comp                                   | any here:                            |                        |          |         |
| Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address   | The new name must be distinguishable and end with                                      | the words "Limited Liability                                 | y Company," the designation          | "LLC" or t             | he abbre | viation |
| Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address   |  |  |                                      | A co                   | 201      |         |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address   | Enter new principal offices address, if applica  | ble:   |                                      | (기 년)<br>22-22         | <u> </u> |         |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address   | (Principal office address MUST BE A STREET   | ADDRESS)   |                                      | - 1                    |          | 1 .<br> |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address   |  |  |                                      |                        |          | F-12.   |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  |  |  |                                      | r1 -*1                 |          |         |
| Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address   | Enter new mailing address, if applicable:  |  |                                      |                        |          |         |
| Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  | (Mailing address MAY BE A POST OFFICE B  | <u></u>  |                                      | <u>ಾರ್</u> ಗ<br>ಕ್ರಾಬ್ |          |         |
| New Registered Office Address:  Enter Florida street address   |  |  | ess on our records, ente             | r the nam              | e of th  | e new   |
| Enter Florida street address   | Name of New Registered Agent:  |  |                                      |                        |          |         |
|  | New Registered Office Address:   |  |                                      |                        |          |         |
| Florida  |  |  | Enter Florida street a               | ddress                 |          |         |
| //   |  |  | , Florida                            |                        |          |         |
| City Zip Code  |  | City   |                                      | Zip C                  | lode :   |         |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u>                | Address                | Type of Action                                   |
|--------------|----------------------------|------------------------|--|
| MĢR          | Fabio H. Silveira Noguiera | 888 South Douglas Rd   | ✓ ∧dd  |
|              |                            | No. 403                | Remove   |
|              |                            | Coral Gables, FL 33134 |  |
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| . If amending any othe                | r information, e | enter change(s) here: (Attach additional sheets, if necessary.) |
|---------------------------------------|------------------|---|
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| •                                     |                  |   |
|                                       |                  |   |
| <sub>ated</sub> February              | 28               | 2013  |
|                                       |                  |   |
|                                       | Signature        | of a member or authorized representative of a member            |
| Osvaldo                               | R. Filho         |   |
| <del></del>                           |                  | Typed or printed name of signee                                 |

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Filing Fee: \$25.00