# 13000000395

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T. HAMPTON

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

INBAYA, 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:

## HAYDEE CEBALLOS, CPA

Name of Person

#### SUAREZ CEBALLOS ORTIZ & VEGA

Firm/Company

#### 354 SEVILLA AVENUE

Address

## CORAL GABLES, FL 33134

City/State and Zip Code

#### haydee@scovcpas.com

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

For further information concerning this matter, please call:

### HAYDEE CEBALLOS

,,305,**448-525**5

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 FILED SECRETARY OF STATE O

INBAYA, LLC	
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number L13000000395	were filed on JANUARY 2, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
IMBAYA, LLC	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1200 BRICKELL BAY DRIVE APT. 2919
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33131
Enter new mailing address, if applicable:	1200 BRICKELL BAY DRIVE APT. 2919
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33131
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:	
	, Florida

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

Title ·	Name	Address	Type of Action
MGRM	DANIEL CARDENAS	1200 BRICKELL BAY DR. APT. 2919	9 🗸 Add
		MIAMI, FL 33131	Remove
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D. If	amending any other information, en	nter change(s) here:	(Attach additional sheets, if necessary.)	
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',				_
Dated	JANUARY 21	2013		<del></del>
	Hayde Cel			
	·		zed representative of a member	
	HAYDEE CEBALLO	OS, REGISTER	RED AGENT	
	<del> </del>	Typed or printed	name of signee	

Page 3 of 3

Filing Fee: \$25.00

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