# L13000005832

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(City/State/Zip/Phone #)		
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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

### ARAVEN EQUIPMENT 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:

#### ANA ANTORAN MARTIN

Name of Person

### ARAVEN EQUIPMENT LLC

Firm/Company

3325 NW 70TH AVE

Address

MIAMI FL 33122-1332

City/State and Zip Code

#### AANTORAN@ARAVEN.ES

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

For further information concerning this matter, please call:

JULIAN RUBIO

,,305<sub>\</sub>777-7498

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

## FILED 2013 APR 19 AN 11: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Li	9 WIPMENT, ability Company as it now appenrs on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L13000005832</u>	ility Company were filed on 11 JAI	NUARY 2013 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, <u>enter the new name of th</u>	e limited liability company here:	
The new name must be distinguishable and end with the L.L.C."	he words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BC</u>	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter I	Florida street address
	City	, Florida Zip Code
	City	zip Code

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>	Name	Address	Type of Action
MGB	ANA ANTORAN MARTIN	POL MALPICA, C/ENT.	X Add
		50057 ZARAGOZA	
	,	ESPANA	
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lf amending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)
od APRIL	2013
:u	
S	ignature of a member or authorized representative of a member
ANA ANTORA	AN MARTIN
	Typed or printed name of signee

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Filing Fee: \$25.00

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