

Division of Corporations

11/12/14, 3:55 PM

LP3000007057

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000264024 3)))



H140002640243ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : EPGD ATTORNEYS AT LAW, P.A.
Account Number : 120140000049
Phone : (786)837-6787
Fax Number : (786)837-6787

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

enic@epgd law.com

RECEIVED

14 NOV 12 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLO MX HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

SECRETARY OF STATE
ALL MESSAGES, FLORIDA

2014 NOV 12 AM 10:24

FILED

2014 NOV 12 AM 10:24

TO
ARTICLES OF ORGANIZATION
OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLO MX HOLDINGS, LLC

(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 01/14/2013 and assigned
Florida document number L13000007057.

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 abbreviation "L.L.C."

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 new registered agent and/or the new registered office address here:

Name of New Registered Agent: EPGD Attorneys at Law, P.A.
New Registered Office Address: 2701 Ponce de Leon Blvd., Ste. 202
Enter Florida street address
Coral Gables, Florida 33134
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 605, 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

Authorized Member being added or removed from our records:

MGR = Manager

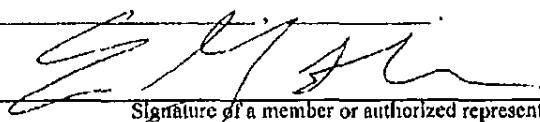
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CARLOS TELLO	18660 South Dixie Hwy	<input checked="" type="checkbox"/> Add
		Cutler Bay, FL 33157	<input type="checkbox"/> Remove
MGR	OSCAR F. LUQUE	18660 South Dixie Hwy	<input type="checkbox"/> Add
		Cutler Bay, FL 33157	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 10 2014



Signature of a member or authorized representative of a member
Eric P. Gros-Dubois, Esq.

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

FILED
2014 NOV 12 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA