L13000082231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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J. SAULSBERRY
EXAMINER

SEP 18 2013

Ave Maria Office Suites, LLC
301 W. Atlantic Ave. – Suite 0-8
Delray Beach, FL 33444
845-764-8036

September 13, 2013

Florida Dept. of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

Enclosed please find an Amendment form for Ave Maria Office Suites, LLC together with a copy of the previously amended articles of the organization.

If you have any questions, please contact me at 845-764-8036.

Sincerely yours,

Theodore Vargas

Enclosures:

2013 SEP 16 AM 8:22

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Ave Maria Office Suites, 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:

Theodore Vargas
Name of Person

Ave Maria Office Suites, LLC
Firm/Company

301 W. Atlantic Ave. - Suite 0-8
Address

Delray Beach, FL 33444
City/State and Zip Code

ted@cpatrust.com
E-mail address: (to be used for future annual report notification)

2013 SEP 16 AM 8:22

For further information concerning this matter, please call:

Theodore Vargas at (845) 764-8036
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

Ave Maria Office Suites, 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 January 15, 2013 and assigned Florida document number L13000008231.

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)

N/A

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

2013 SEP 16 AM 9:22

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: N/A

New Registered Office Address: _____
Enter Florida street address

_____, **Florida** _____
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.

N/A
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	Evelyn T. Santiesteban	5 Waters View New City, NY 10956	☑ Add ☐ Remove
MGRM	Luis C. Rivera	586 Route 304 New City, NY 10956	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

2013 SEP 16 AM 8:22

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated September 13 2013

Signature of a member or authorized representative of a member

Theodore Vargas

Typed or printed name of signee

Filing Fee: $25.00

2013 SEP 16 AM 8:22