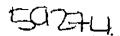
00008457 Florida Department of State

Division of Corporations Electronic Filing Cover Sheet



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Division of Corporations

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Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)634-3694

: (305)633-9696

Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 630 TIZIANO AVE LLC

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu Corporate Filing Menu

Help

H1300000410819.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

630 HZIANO AVE LLC				
(Name of the Limite	d Liability Co.	mpany as it now appear ed Liability Company)	on our records.)	
The Articles of Organization for this Limited Florida document number <u>L13000008457</u>	Liability Comp			and assigned
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited	liability company here	:	ယ်
N/A				~ ;
The new name must be distinguishable and end w"L.L.C."	vith the words "I	Limited Liability Compar	ly," the designation "LI	C" or the abbreviation
Enter new principal offices address, if appli	icable:	N/A		
(Principal office address MUST BE A STRE		5)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	מאמ ז	N/A		
B. If amending the registered agent and registered agent and/or the new registered	l/or registered	d office address on o	or records, enter the	pame of the nev
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Ent	er Florida street addre	22
			, Florida	_
		Clor		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

Page 1 of 3

HISTANTINGIA

96968899

60:11 8102/12/20

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:

m + 11 - 1*

MGR = Ma MGRM = N	nager Ianaging Member		
Title	Name	Address	Type of Action
MGRM	EMILIO ARGUELLO	C/O 1001 BRICKELL BAY DRIVE, SUITE 3112	2 Add
		MIAMI, FL 33131	Remove
MGRM	LILIANA ARGUELLO	C/O 1001 BRICKELL BAY DRIVE, SUITE 311:	2 Add
		MIAMI, FL 33131	Remove
	· · · · · · · · · · · · · · · · · · ·		Add
			Add Sanove
			1: 3a
			Rémove Add Remove

Page 2 of 3

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í arne	nding any other information, enter change(s) have: (Attach additional sheets, if necessary.)
ļ	N/A
-	·
_	
-	
-	
	= 1 2 2019
	February 21 , 2013
	Signature of a member or aptiorized representative of a member
	MARITZA E. PEREZ, AUTHORIZED REPRESENTATIVE
	Typed of printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

13 FEB 21 AH 7: 32