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2013 AUG 19 AM 9:15  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

AUG 21 2013

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 435 Hampton, 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:

Rodolfo Prinett

Name of Person

435 Hampton, LLC

Firm/Company

636 Sabal Palm Rd.

Address

Miami, FL 33137

City/State and Zip Code

roprinetto@yahoo.com

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

For further information concerning this matter, please call:

Rodolfo Prinetto

Name of Person

at ( 305 ) 2979185

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA  
STATE

Enclosed is a check for the following amount:

- |                                                        |                                                                        |                                                                                                  |                                                                                                                            |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

435 Hampton, 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 02/21/2013 and assigned  
Florida document number L3000027130.

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)

FILED  
2018 AUG 19 AM 9:15  
CLERK OF CIRCUIT COURT  
11th JUDICIAL CIRCUIT  
IN AND FOR THE STATE  
OF FLORIDA

**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:

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.*

\_\_\_\_\_  
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Vittorio Prinetto	636 Sabal Palm Rd.	<input type="checkbox"/> Add
		Miami, FL 33137	<input type="checkbox"/> Remove
MGRM	Rodolfo Prinetto	636 Sabal Palm Rd.	<input type="checkbox"/> Add
		Miami, FL 33137	<input type="checkbox"/> Remove
MGR	Juan Jose Gabaldon	111411 Biscayne Blvd.	<input type="checkbox"/> Add
		Apt.1851	<input type="checkbox"/> Remove
		North Miami, FL 33161	
MGR	Guillermo Kubler	110 SW 12th Street	<input type="checkbox"/> Add
		Apt.1507	<input type="checkbox"/> Remove
		Miami, FL 33130	
MGR	Rafael Santana	2000 Island Blvd.	<input checked="" type="checkbox"/> Add
		Apt.707	<input type="checkbox"/> Remove
		Aventura, FL 33160	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated August 15th, 2013.



\_\_\_\_\_  
Signature of a member or authorized representative of a member

**Rodolfo Prinetto**

\_\_\_\_\_  
Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

**FILED**  
**2013 AUG 19 AM 9:15**  
CLERK OF STATE  
TALLAHASSEE, FLORIDA