

L13000037759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

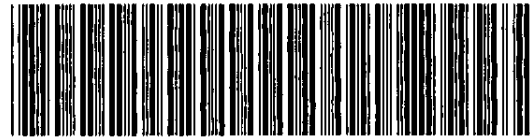
(Document Number)

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FILED  
2013 MAR 18 AM 9:12  
J. SAULSBERRY  
TALLAHASSEE, FL 32301

J. SAULSBERRY  
EXAMINER  
MAR 19 2013

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Best Deal Investment, 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:

Cristina Zieger / % Carlos Cavo  
Name of Person

Best Deal Investment, LLC.  
Firm/Company

1111 Biscayne Blvd #425, Miami, FL 33181  
Address

Miami Florida, 33181  
City/State and Zip Code

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

For further information concerning this matter, please call:

Cristina Zieger at (786) 413-7170  
Name of Person Area Code & Daytime Telephone Number

RECEIVED  
TALLAHASSEE, FLORIDA

2013 MAR 18 AM 9:12

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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**

\_\_\_\_\_  
**(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 \_\_\_\_\_ and assigned  
Florida document number L13000037759.

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: \_\_\_\_\_

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**

**MGR = Manager**  
**MGRM = Managing Member**

MG RM	STEFANIA A. CAVO	1111 Biscayne Blvd #425 Miami, FL 33181	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGRM	LEANDRO E. CAVO	1111 Biscayne Blvd. # 425	<input type="checkbox"/> Add
		Miami, Fl. 33181	<input checked="" type="checkbox"/> Remove

☐ Add  
2013 MAR 18 AM 9:12 ☐ Remove  
☒ Add  
2013 MAR 18 AM 9:12 ☐ Remove

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

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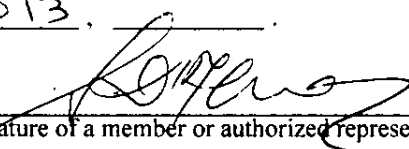
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Dated 3/14/2013

  
Signature of a member or authorized representative of a member

SANDRA S. D'ALESSANDRO

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**