## #1/3000039072

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY EXAMINER AUG 21 2013

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILE	•
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ords. 7 43 1/5 ~ 7/4 1/5	

IGUZMAN CAPITAL, LLC.

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

(A	Florida Limited Liability Company)	" LURIDA"			
The Articles of Organization for this Limited Lia Florida document number L13000039072	ability Company were filed on 03-14-201	3 and assigned			
This amendment is submitted to amend the follo	· ·				
A. If amending name, enter the new name of	the limited liability company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the d	esignation "LLC" or the abbreviation			
Enter new principal offices address, if applica	ıble:				
(Principal office address MUST BE A STREET	T ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE E	<u></u>				
B. If amending the registered agent and/o registered agent and/or the new registered off		rds, enter the name of the new			
Name of New Registered Agent:					
New Registered Office Address:					
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 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** <u>Name</u> Address **Type of Action** SANDRA VELA 1604 EAGE FEATHER DR **MGR** KISSIMMEE, FL 34746 Remove Remove Remove Remove Add Remove

). If	Je.	ding any	other info	ormation,	enter chan	ge(s) here	: (Attach	additional sh	eets, if necessary.)	
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				Signatur	e of a membe	er or author	ized repres	entative of a n	iember	
		DIE	30 GU	ZMAN	- MGRM	1				

Typed or printed name of signee

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