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(Pe	questor's Name)			
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Certified Copies	Certificates	of Status		
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Special Instructions to Filing Officer:				
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JAN - 9 2013 T. HAMPTON

COVER LETTER

Division of Con		'	y K
SUBJECT:	liami 1 Inves	stments LLC. ted Liability Company	
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	10	AN TOVAR	
		Name of Person	
	Miami 1	lovestments e	LLC
		Firm/Company	
	1800 Milan	Firm/Company Dopy AVE. Hiam, 7	1 33/33
	XI)	ami FL 331.	33
		City/State and Zip Code	
		an tovar@me.c	
	•	o be used for future annual report notificat	ion)
	concerning this matter, please c		
_ Al Fonsi	Gonzalez	at (786) 587 9 Area Code & Daytime To	123
Name o	of Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for t	-		
\$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



RECEIVED

14 JAN -3 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2013

IVAN TOVAR 1800 MICONOPY AVE MIAMI, FL 33133

SUBJECT: MIAMI 1 INVESTMENTS LLC

Ref. Number: L13000040353

We have received your document for MIAMI 1 INVESTMENTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 813A00028759

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)							
The Articles of Organization for this Limited Liability Company were filed on Florida document number 4 13000 40 353	2013 and assigned						
Florida document number <u>213000 90 33</u>							
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:	2013 DEC SECRET TALL AHA						
A. It amending name, enter the new name of the limited hability company here:							
The new name must be distinguishable and end with the words "Limited Liability Company," "L.L.C."	· · · · · · · · · · · · · · · · · · ·						
Enter new principal offices address, if applicable:	EONO PY AVER 5 FL 33/33						
(Principal office address MUST BE A STREET ADDRESS) / / Wmj	FL 33/33						
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: Allon 50 J	bonealez						
New Registered Office Address:							
Enter F	Enter Florida street address						
	, Florida Zip Code						
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 profided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office affirest 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>	Name	Address	Type of Action
MGR	AlFonso J Gonzaliz	9353 Fontaineblau Blue	Add
		9353 Fontaineblau Blue # A103 Mani Fl 33133	Remove
			_
			Add
			Remove
			_
			Add
			Remove
			_
			Add
			Remande
			SECRETARY OF STATE
			TASSET Add
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			- Add
			Remove

Page 3 of 3

Filing Fee: \$25.00

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