## 13000049793

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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

	ENT & DEVELOPMENT OF	DORAL, LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	FABIOLA CAMISA		
	· · · ·	Name of Person	
	FABIOLA CAMISA		
	<del></del>	Firm/Company	<del></del>
	10825 NW 33 STREET		F . =
		Address	<del>,</del> ;
	DORAL - FL 33172		
		City/State and Zip Code	
	fabiolacamisa@hotmail.cor		· · ·
	E-mail address: (	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
FABIOLA CAMISA		786 306-9851	
Name o	f Person		Telephone Number
Enclosed is a check for the	he following amount:		
■ \$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)
Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer	n ations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Lim		any as it now appears on our r Liability Company)	ecords.)		
	(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on APRIL 04			2013	and assigned	
Florida document number 1.13000049793					
This amendment is submitted to amend the fol	lowing:				
		ilian annumum kana			
A. If amending name, enter the new name of	o the innited han	onny company nere:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbiev	iation "L.L.C."	
Enter new principal offices address, if applicable:		10825 NW 33 STREET			
		DORAL - FL 33172	· · · · · · · · · · · · · · · · ·		
The state of the s	<u> </u>			··· <u>-</u>	
Enter new mailing address, if applicable:		10825 NW 33 STREET	بر <del>د</del>	••	
(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 registered agent and/or the new registered office address he	DORAL - FL 33172		,,,		
		· · · · · · · · · · · · · · · · · · ·			
			· · · · 	7	
B. If amending the registered agent and registered agent and/or the new registered of	/or_registered_o ffice address her	ffice address on our rec e:	cords, <u>enter the</u>	name of the ne	
		<u>*</u> .	7	. 7	
Name of New Registered Agent:	FABIOLA CA	MISA			
New Registered Office Address:	10825 NW 33 5	STREET			
New Registered Office Address.	<del></del>	Enter Florida street a			
	DORAL	. Florida		a 33172 Zip Code	
			- <u>-                                  </u>	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	_			
hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete istered agent as p registered office	performance of my dutie provided for in Chapter (	rs, and Lam fami 605. F.S. Or, if th	liar with and iis document is	

If Changing Registered Agent, Signature of New Registered Agent

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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fective date, if other than the date of filing:	cable statutory fili	(opti more than 90 days after ng requirements, thi	onal) tiling.) Pursuant to 6 s date will not be li	05.0 sted
record specifies a delayed effective date, but no The 90th day after the record is filed.	ot an effective	time, at 12:01 a	a.m. on the ear	lier
ated AUGUST 02 2017		•		

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Filing Fee: \$25.00