

L13000055123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

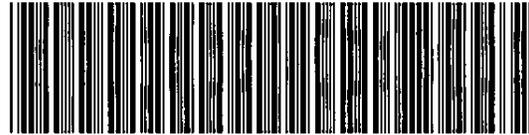
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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B. POSTICK

FEB 13 2014

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2717, L.L.C.

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:

Heather Perry

Name of Person

Moraitis, Cofar, Karney & Moraitis

Firm/Company

915 Middle River Drive, Suite 506

Address

Fort Lauderdale, FL 33304

City/State and Zip Code

hperry@mcklaw.com

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

For further information concerning this matter, please call:

Heather Perry

Name of Person

at ( 954 ) 563-4163

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

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

2014 FEB 12 PM 0:11

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

2717, L.L.C.

(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 04/15/2013 and assigned Florida document number L13000055123.

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	FLORENNA FUENTES-ISREAL	4830 NE 28TH AVE., FT. LAUDERDALE, FL 33308	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGRM	FIORENNA FUENTES-ISRAEL	4830 NE 28TH AVE., FT. LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

NOTE: THESE ARTICLES OF AMENDMENT ARE BEING FILED TO CORRECT THE SPELLING OF THE HORN'S FIRST NAME FROM FLORENNIA TO FIORENNIA.

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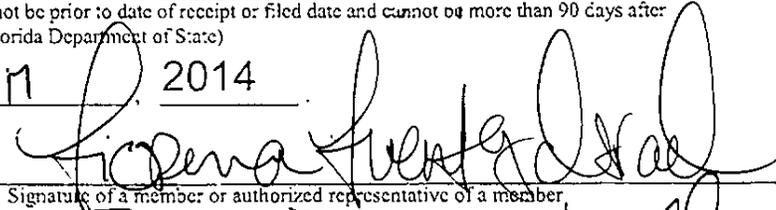
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated January 11, 2014



Signature of a member or authorized representative of a member

Fiorena Fuentes - Isral

Typed or printed name of signee

2014 JAN 12 PM 6:12  
011 030



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 30, 2014

HEATHER PERRY  
MORAITIS, COFAR, KARNEY & MARAITIS  
915 MIDDLE RIVER DRIVE, SUITE 506  
FT. LAUDERDALE, FL 33304

SUBJECT: 2717, L.L.C.  
Ref. Number: L13000055123

2014 FEB 12 PM 12:12  
RECEIVED  
CORPORATION DIVISION

We have received your document for 2717, L.L.C. 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 effective date must be specific and cannot be prior to the date of filing.

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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 414A00002167