

LI3000057951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

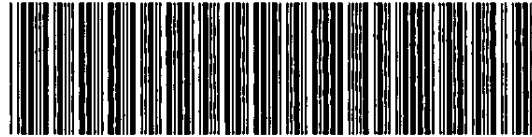
(Document Number)

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

Special Instructions to Filing Officer:

*Amend*

Office Use Only



900248401439

900248401439  
06/11/13--01021--018 \*\*30.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 JUN 11 AM 8:00

FILED

J. SAULSBERRY  
EXAMINER

JUN 13 2013

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: VAV77 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:

Alexander Martins

Name of Person

PUBLIO MARTINS RUIZ PA

Firm/Company

11501 NW Suite 206 89 St

Address

Miami , FL 33178

City/State and Zip Code

alexandermartinsruiz@gmail.com

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

For further information concerning this matter, please call:

Alexander Martins

Name of Person

at (786) 2196466

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

FILED  
2013 JUN 11 AM 8:00  
TALLAHASSEE, FL  
CLERK OF STATE

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

VAV77 LLC

(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 04/19/2013 and assigned  
Florida document number L13000057951.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

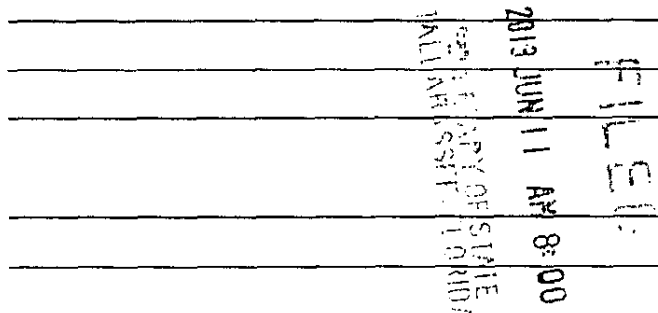
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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

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> | <u>Name</u>               | <u>Address</u>                | <u>Type of Action</u>                      |
|--------------|---------------------------|-------------------------------|--|
| P            | Vera Rivas, Antonio A     | 9050 SW 170CT MIAMI FL, 33196 | <input type="checkbox"/> Add               |
|              |                           |                               | <input checked="" type="checkbox"/> Remove |
| P            | Antonio Vera Ribas        | 9050 SW 170CT MIAMI FL, 33196 | <input checked="" type="checkbox"/> Add    |
|              |                           |                               | <input type="checkbox"/> Remove            |
| VP           | Arbelo Diaz Maria Elena M | 9050 SW 170CT MIAMI FL, 33196 | <input type="checkbox"/> Add               |
|              |                           |                               | <input checked="" type="checkbox"/> Remove |
| VP           | Maria Elena Arbelo Diaz   | 9050 SW 170CT MIAMI FL, 33196 | <input checked="" type="checkbox"/> Add    |
|              |                           |                               | <input type="checkbox"/> Remove            |
|              |                           |                               | <input type="checkbox"/> Add               |
|              |                           |                               | <input type="checkbox"/> Remove            |

2013 JUN 11 AM 8:00  
STATE OF FLORIDA  
TALLAHASSEE  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT

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

---

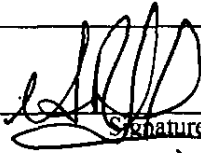
---

---

---

---

Dated 06/10, 2013



Signature of a member or authorized representative of a member

Alexander Martins

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
2013 JUN 11 AM 8:00  
CLERK OF STATE  
TALLAHASSEE FLORIDA