L13000062088

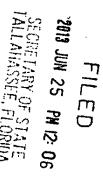
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COVER LETTER

TO: Registration Section
Division of Corporations

Destiny By The Sea 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:

Gerard J Perillo III

Name of Person

Firm/Company

2404 Tuscany Way

Address

Boynton Beach FI 33435

City/State and Zip Code

GJPiii@aol.com

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

For further information concerning this matter, please call:

Gerard Perillo

850 4201623

Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2013 JUN 25 PM 12: 06
SECRETARY OF STATE
TÄLLAHASSEE, FLORIDA

Destiny By The Sea LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on o	ur records.)
(A Florida Limited)	Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on <u>04/29/2</u>	ond assigned
Florida document number L13000062088		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
,		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enton now mailing address if applicables		
Enter new mailing address, if applicable:	10405 Pissoupo F	Phys #403
(Mailing address MAY BE A POST OFFICE BOX)	19495 Biscayne E	
	Aventura FI 33180)
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	orida street address
		Florida
	City	, Florida 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> Address **Type of Action** Name 19495 Biscayne Blvd ste 403 **MGR Edward Sierra** Aventura FL 33180 Remove Remove

D. If amending any other information,	enter change(s) here: (Attach additional sheets, if necessary.)
•	
· · · · · · · · · · · · · · · · · · ·	
Dated June 17th	2013
Mue "	Pen AIII
Signature	e of a member or authorized representative of a member
Gerard J Perillo III	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED SECRETARY OF STATE