13000019153

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BECRETARY OF STATE

B. BOSTICK

JUL **2 6** 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

IBIZA PARADISE 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:

ANTONIO REGOJO

Name of Person

REGOJO LAW, PA

Firm/Company

11077 BISCAYNE BLVD #406

Address

MIAMI, FL 33161

City/State and Zip Code

info@avenidalegal.com

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

For further information concerning this matter, please call:

Antonio Regojo

*..,*305 **814-8299**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

Name of Person

\$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, PL 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

IBIZA PARADISE 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	ity Company were filed on 05/10/2013	and assigned
Florida document number L13000069153		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	ment number L13000069153 The tild is submitted to amend the following: The must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation rincipal offices address, if applicable: The address MUST BE A STREET ADDRESS) The address MUST BE A STREET ADDRESS The address MUST BE A POST OFFICE BOX) The address MUST BE A POST OFFICE BOX The address MUS	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applicable	·:	
(Principal office address MUST BE A STREET A	DDRESS)	
		7 2
		= = = = = = = = = = = = = = = = = = =
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	
		ric lai
B. If amending the registered agent and/or r	registered office address on our record	
registered agent and/or the new registered office	address nere.	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida	street address
	Liner Piorius	Sirect uuar coo
		lorida Zip Code
	City	гір Сойе

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 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 **Type of Action Title** <u>Address</u> <u>Name</u> 11077 Biscayne Blvd #406 **MGRM** Francisco Blas Gonzalez Miami, FL 33161 Remove Remove OI FLORIDA Remove Remove Remove

amending any o	ther information, enter change(s) here: (Attach additional sheets, if necessary.)
July 1	2013
· · · · · · · · · · · · · · · · · · ·	2 2
	Signature of a member or authorized representative of a member
Antoni	o Regojo, Attorney in Fact
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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