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2013 OCT 15 AM 10: 27

J. SAULSBERRY EXAMINER

OCT 17 2013

COVER LETTER

Division of Co	orporations		
SUBJECT:	Fuction 2013 Name of Limit	LLC	
	Name of Limi	led Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		ilvia Del Sol Name of Person	······
		Name of Person	1
	A	Ctos 2013, C	LC
	3151 N	w 36 street	
		Address	
	50 2-	Address Address City/State and Zip Code	
		City/State and Zip Code	
	admix e he	rremapt folgoup voo be used for futule annual report notification	39. cm 4 5
	E-mail address: (t	o be used for future annual report nonficati	on)
For further information	concerning this matter, please c		
Silvi	ia Del sol	at (786) 200-590	20130CT 5 100000000000000000000000000000000000
Name	of Person	Area Code & Daytime Te	elephone 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

TO:

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

Auctros 201	3, LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears (imited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Conference Liabi	ompany were filed on	21/2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company here:		
The new name must be distinguishable and end with the work	LLC "	•	
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company	," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET ADDR	ESS)	4	, 2
		9-1-0 g-14-0	<i>₩</i> = = = = = = = = = = = = = = = = = = =
Enter new mailing address, if applicable:	<u> </u>		ं ज
(Mailing address MAY BE A POST OFFICE BOX)		سم	The state of the s
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	,		THE N
B. If amending the registered agent and/or registeredstagent and/or the new registered office addr	ered office address on our ress here:	r records, enter the	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	· Florida street addre	rss
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add
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			Remove
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October 1	oth , 2017	· .
October 1	oth , 2017	· ·
October 1	# Her	
October 1	# Her	authorized representative of a member
October 1	# Her	

Page 3 of 3

Filing Fee: \$25.00

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