

L13 000080220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

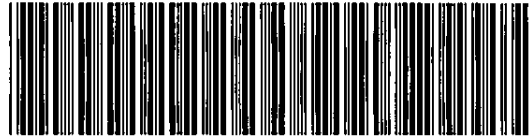
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/02/14--01019--010 **43.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

OCT 28 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 80 TEAM, 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:

JOHN CUTINO

Name of Person

80 TEAM, LLC

Firm/Company

12583 BROOKWOOD CT

Address

DAVIE, FL 33330

City/State and Zip Code

CUTINO61@YAHOO.COM

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

For further information concerning this matter, please call:

JOHN CUTINO

at (305) 799-6204

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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

80 TEAM, 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 06/03/2013 and assigned
Florida document number L13000080220.

This amendment is submitted to amend the following:

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

NONE

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)

12583 BROOKWOOD CT

DAVIE, FL 33330

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12583 BROOKWOOD CT

DAVIE, FL 33330

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:

JOHN CUTINO

New Registered Office Address:

12583 BROOKWOOD CT

Enter Florida street address

DAVIE

City

, Florida 33330

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>
MGR	JOSE L.PEREZ	17707 NW MIAMI CT # 101	<input type="checkbox"/> Add
		MIAMI, FL 33169	<input checked="" type="checkbox"/> Remove
MGR	ERICK A.ESPINAL	17707 NW MIAMI CT	<input type="checkbox"/> Add
		MIAMI, FL 33169	<input checked="" type="checkbox"/> Remove
MGR	MARLON BELIFANTI	17707 NW MIAMI CT	<input type="checkbox"/> Add
		MIAMI, FL 33169	<input checked="" type="checkbox"/> Remove
MGR	ERETT WALLACE	17707 NW MIAMI CT	<input type="checkbox"/> Add
		MIAMI, FL 33169	<input checked="" type="checkbox"/> Remove
MGR	JOHN CUTINO	12583 BROOKWOOD CT	<input type="checkbox"/> Add
		DAVIE, FL 33330	<input type="checkbox"/> Remove
MGR	MAYRA INSUA	12583 BROOKWOOD CT	<input checked="" type="checkbox"/> Add
		DAVIE, FL 33330	<input type="checkbox"/> Remove

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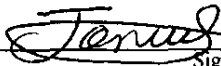
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

NONE

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 _____, _____.



Signature of a member or authorized representative of a member

John Cutino

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2014 OCT 27 A 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2014

JOHN CUTINO
12583 BROOKWOOD COURT
DAVIE, FL 33330

SUBJECT: 80 TEAM, LLC
Ref. Number: L13000080220

We have received your document for 80 TEAM, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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: 914A00022138

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TALLAHASSEE, FLORIDA