# L13000082860

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SILBLECT. S.I.B. CAPITAL 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:

Steven F. Pessoa, Esq.

Name of Person

Nelson Slosbergas, P.A.

Firm/Company

1110 Brickell Avenue, Suite 310

Address

Miami, Florida 33131

City/State and Zip Code

steven@miami-intl-law.com

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

For further information concerning this matter, please call:

Steven F. Pessoa, Esq.

305,374-0030

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

# NELSON SLOSBERGAS, P.A.

1110 BRICKELL AVENUE SUITE 310 MIAMI, FLORIDA 33131

E-MAIL ADDRESS nelson@miami-intl-law.com
WEB PAGE www.miami-intl-law.com

NELSON SLOSBERGAS ATTORNEY AND CIVIL LAW NOTARY (305) 374-0030 FAX (305) 374-2855

September 30, 2013

**Secretary of State** 

Division of Corporation 2661 Executive Center Circle Tallahassee, Florida 32301

**VIA Federal Express** 

RE: S.B.I. CAPITAL LLC

Dear Sir or Madam,

Enclosed please find the Articles of Amendment to Articles of Organization for the Company reference above, together with our check in the amount of \$25.00 representing the filing fee.

I kindly ask that you proceed with filing of the same. Once file, please return the confirmation to our office, in the self addressed stamped envelope enclosed.

Thank you for your attention to this matter.

Strater

Jennifer Deahora,

Corp Legal Secretary

[Direct E-Mail: jenny@miami-intl-law.com]

Enclosures (as noted)

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

### S.I.B. CAPITAL, 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 Li	and assigned			
Florida document number L13000082860				
	······································		AND THE	
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liabili	ty company here:		
•			The E	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limite	d Liability Company," the designa	ttion "LLC" or the abbreviation	
Enter new principal offices address, if applic	able:	15140 SW 104 Street, M		
(Principal office address MUST BE A STREE	T ADDRESS)	<u> </u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	15140 SW 104 Street, M	liami, Florida 33196	
B. If amending the registered agent and/registered agent and/or the new registered of			enter the name of the nev	
Name of New Registered Agent:	<del></del>		<del></del>	
New Registered Office Address:	15140 SW 104 Street, Miami, Florida 33196			
· · · · · · · · · · · · · · · · · · ·	Enter Florida street address			
	Miami	. Flor	ida <u>33196</u>	
		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 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>	Address	Type of Action	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	y.) 🦈	
September 27 2013		
Dated Goptombol 27, 2010		
® 1/1//		_
Signature of a member or authorized representative of a member		
Roberto Batista	·	_
Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00