L17000087548

Florida Department of State

Division of Corporations

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : TAXLEAF.COM INC
Account Number : I20140000094
Phone : (305)541-3980
Fax Number : (888)772-8108

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LLC AMND/RESTATE/CORRECTOR M/MG RESIGN

SAVAGNA PROPERTIES LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	$25.00

J. LEGGETT
DEC 22 2017

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SAVAGNA PROPERTIES 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 06/17/2013 and assigned Florida document number L13000087548.

This amendment is submitted to amend the following:

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

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)
14334 BISCAYNE BLVD
NORTH MIAMI BEACH, FL 33181

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
14334 BISCAYNE BLVD
NORTH MIAMI BEACH, FL 33181

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: ROMAR INTERNATIONAL LLC

New Registered Office Address: 14334 BISCAYNE BLVD
Enter Florida street address
NORTH MIAMI BEACH, Florida 33181
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 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

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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

Title	Name	Address	Type of Action
AMBR	SAVAGNA LTD	325 WATERFRONT DR, OMAR HODGE BUILDING 2ND FLOOR ROAD TOWN, TORTOLA, BRITISH VIRGIN ISLAND	☒ Add ☐ Remove
MGR	DOMINGOS, CLAUDIO A	8855 COLLINS AVE #6-G SURFSIDE, FL 33141	☐ Add ☒ Remove
MGR	MALUF DOMINGOS, RAFAEL	8855 COLLINS AVE, #6-G SURFSIDE, FL 33141	☐ Add ☒ Remove
MGRM	SAVAGNA LTD	325 WATERFRONT DRIVE, OMAR HODGE BLDG TORTOLA VG	☐ Add ☒ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

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 DECEMBER, 11TH 2017

Signature of a member or authorized representative of a member

CLAUDIO DOMINGOS

Typed or printed name of person

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