L 13000/05702

(1	Requestor's Name)
	Address)
. (/	Address)
(1	City/State/Zip/Phone #)
PICK-UP	
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
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AUG 05 2014 S. YOUNG

COVER LETTER

TO: **Registration Section Division of Corporations**

Mainter ((C))SUBJECT: 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:

Maria Hernandez Name of Person nno Set Drive IHD -----33173 iam-City/State and Zip Code

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

For further information concerning this matter, please call:

at (<u>786)</u> <u>406-5477</u> 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) S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section

Tailahassee, FL 32314

P.O. Box 6327

Division of Corporations

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF A TC ARTICLES OF O OI) RGANIZATION
Cofs Main-tenance (Name of the Limited Liability Compan (A Florida Limited Li	<u>v as it now appears on our records.</u> ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L1300D105702</u>	vere filed on <u>125/2014</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabil</u> NIA	ity company here:
The new name must be distinguishable and end with the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:	12300 Sunset Drive
(Principal office address MUST BE A STREET ADDRESS)	SKE 140 Higmi FL 33173
Enter new mailing address, if applicable:	10300 Sunset Drive
(Mailing address MAY BE A POST OFFICE BOX)	SE 140
	<u> </u>
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:	ice address on our records, enter the name of the new
Name of New Registered Agent:	NA
New Registered Office Address:	
<u></u>	Enter Florida street address - 2000
	, Florida
	City Zup 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or</u> <u>Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
		NA	🗆 Add
			Remove
			🗅 Add
			🗆 Remove
			D ٨dd
			□ Remove
			□ Remove
			🗆 Remove

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

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Changing address to 10300 Sunsel Drive
J Ste 140
Micmi FR 33173
C. 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 7 25 14 2014
2 ft
Signature of a member or authorized representative of a member
Mana, Hernandez

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Filing Fee: \$25.00