

L/13000/13295

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VALLI ART LLC

Certificate of Status	0
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Page Count	03
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K. SALLY
EXAMINER
NOV 18 2014



November 17, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VALLI ART LLC
60 SW 13 ST
SUITE 501
MIAMI, FL 33130

SUBJECT: VALLI ART LLC
REF: L13000113295

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Karen A Saly
Regulatory Specialist II

FAX Aud. #: H14000265962
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BUREAU OF COMMERCIAL
INFORMATION SERVICES

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SECRETARY OF STATE
TALLAHASSEE, FLORIDAARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

VALLI ART 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 August 12, 2013 and assigned
Florida document number L 13000113295

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)717 CRANDON BLVD, UNIT 207
KEY BISCAYNE, FL 33149

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)717 CRANDON BLVD, UNIT 207
KEY BISCAYNE, FL 33149B. 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: FRANCO VALLINew Registered Office Address: 717 CRANDON BLVD, UNIT 207

Enter Florida street address

KEY BISCAYNE, Florida 33149

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

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	Francesco Pizzo	60 sw 13 street, ste 501, Miami, Fl 33130	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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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 November 12 2014



Signature of a member or authorized representative of a member

Franco Valli, President

Typed or printed name of signer

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