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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PiCK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SEP 2 0 2013

D. BRUCE

COVER LETTER

TO:	Registration Sect Division of Corpo			
CHDI	· Cor.	Change n Name of Limit	ama of MGR	
SUBJE		Name of Limit	ed Liability Company	-
		mendment and fee(s) are sub-		
Please	return all correspond	dence concerning this matter	to the following:	
		T	na Hyde Name of Person	, MARIE
••	4.i	Nanti	alma 11 C Firm/Company	····
	(i)	2609 C	ollins AV	
		Miami Bo	zech 33140	200
-	20	٠.	City/State and Zip Code	EP -
	,	E-mail address: (to	be used for future annual report notification	
For fur	ther information con	cerning this matter, please ca	^{111:} 786	6052 SE S
	Ting H	de	at () 319 -	
	Name of F	Cison	Area Code & Dayline Te	iepitotie Mulitoei
Enolos	ed is a check for the	following amount:		
L \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nan	tialma 11C		
(<u>Name of the Limited Lial</u> (A Flo	bility Company as it now appea rida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on(08 25 13	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the 'L.L.C." Enter new principal offices address, if applicable Principal office address MUST BE A STREET A	: 	any," the designation "L	LC" or the abbreviation
rrincipai office adaress MUST BE A STREET A	<u></u>		water to the second sec
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	N	ALL AHASS	SEP 19
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter & SON	he same of the new
Name of New Registered Agent:			
New Registered Office Address:	Er	nter Florida street add	ress
_		, Florida	
	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 Changing Registered Agent, Signature of New Registered Agent

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
			Add
			Remove
			Add
			Remove
		- 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 1845 - 184	
			Add
			SSE P Remove
			Add Remove
			Add

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
• •	The name Branzani Hugo F. (15 wrong)	
	The Correct name is Brazani Farnando	Huge
:		ď
_		
Dated	September 14, 2013.	
	Signature of a member or authorized representative of a member	
	(Tina Hyde)	
	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00

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