L13000120157

(Requestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor			
		ENDA N LLC		
SUBJEC	CT:			
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Picase re	eturn all correspo	ondence concerning this matter	to the following:	
		E	DWARD MEJIA	
	Name of Person			
	Firm/Company			
	1835 NW 112ND AVE SUITE 164			
	Address			
			MIAMI FL 33172	
A			City/State and Zip Code	,
•		EDMEJIA@TBSTAX.NET		
			to be used for future annual report notif	ication)
For furth	her information c	oncerning this matter, please ca	all:	
£DWA!	RD MEJIA		646 996-4212 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for t	he following amount:		
■ \$25	5.00 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 Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee 2 Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LA HACIES	NDA N LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our raited Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Comp.	pany were filed on AUG 26, 2	013	_ and assigned
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 contain the words "Limited I	Liability Company," the designation	"LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	· ··	_	
<u> Principal office address MUST BE A STREET ADDRES</u>	<u> </u>		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)			(*)
 If amending the registered agent and/or registered off gent and/or the new registered office address here: 	fice address on our records, <u>c</u>	enter the name (: >	f the new regis
Norman SM our Discript small Assessed		.~	•
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street e	nddens	
	Enter Florida Street (иса Сээ	
	City	_, Florida	Zip Code
	City		rap Coue

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added by removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	DANNY VICENZO MONTICELL	12855 HICKORY RD	
		N MIAMI FL 33182	_
			Change
			Remove
			Change
			Remove
			Change
			———□Add ⊜
			□Remove
			☐ Change
			—————————————————————————————————————
			□Remove
			Change
			□Add
		<u> </u>	□Remove
			□Change

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) (optional)
(If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0707 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The with day after the record is filed Dated 104 8 2001 Signature of a member or authorized representative of a member

Filing Fee: \$25.00