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Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC

Account Number: I20150000089 : (305)444-8800 Phone Fax Number : (305)444-4010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

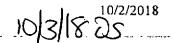
## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RUBI II INVESTMENTS LLC

Certificate of Status	0
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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RUBI II INVEST	MENTS LLC
(Name of the Limited Liability Come (A Florida Limited	pnny na it naw annears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compar Florida document number <u>L13000124246</u>	ny were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	hility 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)	2330 Ponce de Leon Blvd Coral Gables, FL 33134,
Enter new malling address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2330 Ponce de Leon Blvd Coral Gables, FL 33134
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the new ere:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered Ager	
	gree to act in this capacity. I further agree to comply with the ate performance of my duties, and I am familiar with and as provided for in Chapter 605, F.S. Or, if this document is
īrc	hauging Registered Agent, Signature of New Registered Agent
Pag	ge 1 of 3

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

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	GRACIELA MERCEDES VILA-CHA	IIII SW I ST AVE	🖸 Add
		UNIT# 2820-N	
		MIAMI, FL 33130	Remove
			🖾 Сһалде
MGR	JUAN MANUEL RIVEIRO	IIII SW I ST AVE	🗖 Add
		UNIT# 2820-N	
		MIAMI, FL 33130	Remove
MGR	MARINA RIVEIRO	1111 SW I ST AVE	Add
		UNIT# 2820-N	Remove :
		MIAMI, FL 33130	Change
MGR	JIMENA RIVEIRO	IIII SW I ST AVE	□ Add
		UNIT# 2820-N	■ Remove
		MIAMI, FL 33130	Chunge
MGR	Genciela Meacedes Vila - CHa	1451 Brickell Avenue Unit 3102	■ Add
		Miumi FL 33131	□ Remove
			Change
MGR	Juan Manuel Rivero	1451 Brickell Avenue Unit 3102	■ Add
		Miami FL 33131	□ Remove
			Change

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. ...

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARINA RIVEIRO	1451 Brickell Avenue Unit 3102	<b>■</b> Add
		Miami FL 33131	·
			□ Remove
			Change
MGR	JIMENA RIVEIRO	1451 Brickell Avenue Unit 3102	
		Miami FL 33131	<b></b>
		<del></del>	□ Remove
			□ Change
			Remove
			Change
			N 1
			Remove
			Chunge
			Add
			☐ Remove
			Change
			Add
			☐ Remove
			Change

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smending any other information, enter change(s) here: (Attach oxiditional sheets, if necessary.)	
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ie record specifies a delayed effective date, but not an effective time, at 12:01 a.m., on the ear The 90th day after the record is filed.	lier of: かふ
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Dated 10/2/2018	
	• •
Signature of a member or authorized representative of a member	$\frac{\omega}{2}$

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