

L13000124334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

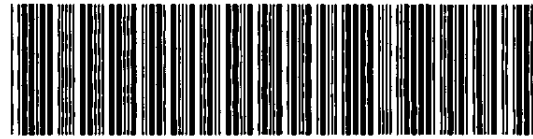
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Demond

Office Use Only



300252099973

10/21/13--01021--015 **25.00

FILED

13 OCT 21 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS

T. Burch OCT 24 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Andaluz Real Estate LLC
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:

NORMAND ALVAREZ
Name of Person

Andaluz Real Estate, L.L.C.
Firm/Company

12150 SW 132nd COURT #215
Address

Miami, FL 33186
City/State and Zip Code

marilyndiaz@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORMAND ALVAREZ at (305) 283-9735
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Andaluz Real Estate, 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 09/12/2013 and assigned
Florida document number L13000124334.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
13 OCT 21 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. 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:

New Registered Office Address:

Enter Florida street address

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>	<u>Address</u>	<u>Type of Action</u>
<u>Pres.</u>	<u>Normand Alvarez</u>	<u>12247 SW 140 Street Miami, FL 33186</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>Normand Alvarez</u>	<u>12247 SW 140 Street Miami, FL 33186</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>VP</u>	<u>Marilys Diaz</u>	<u>12247 SW 140 Street Miami, FL 33186</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>Marilys Diaz</u>	<u>12247 SW 140 Street Miami, FL 33186</u>	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

13 OCT 21 AM 10:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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

Dated October 15, 2013



Signature of a member or authorized representative of a member

MARILYN S DIAZ

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
13 OCT 21 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA