

L13000137964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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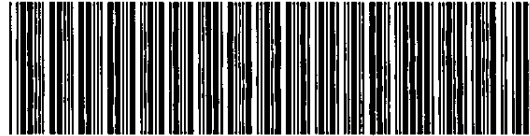
(Business Entity Name)

(Document Number)

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**K. SALY
NOV 22 2016**

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 99TH FLOOR 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:

MARCIO ANDRADE

Name of Person

Firm/Company

1000 PONCE DE LEON BLVD STE 303

Address

CORAL GABLES, FL 33134-3354

City/State and Zip Code

marcio.andrade211@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCIO ANDRADE

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☒ \$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**

99TH FLOOR LLC

(Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company))

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/01/2013 and assigned
Florida document number L13000137964

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 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)

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:

MARCIO ANDRADE

New Registered Office Address:

1000 PONCE DE LEON BLVD STE 303

Enter Florida street address

CORAL GABLES

City

Florida 33134-3354

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.

Marcio Andrade
If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	DOUGLAS FILTER	1000 PONCE DE LEON BLVD STE 303	☐ Add
		CORAL GABLES	☐ Remove
		FL 33134-3354	☐ Change
MGR	MARCIO ANDRADE	1000 PONCE DE LEON BLVD STE 303	☐ Add
		CORAL GABLES	☐ Remove
		FL 33134-3354	☐ Change
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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TALLAHASSEE
CLERK OF COURT
TALLAHASSEE, FLORIDA

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.

Dated November 7, 2016

Signature of a member or authorized representative of a member

MARCIO ANDRADE

Typed or printed name of signee