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COVER LETTER

TO: Registration Section
Division of Corporations

URIFICE. D & A Properties of South Florida, 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:

Daniel O. Alonso

Name of Person

D & A Properties of South Florida, LLC

Firm/Company

17145 North Bay Road #4605

Address

Sunny Isles Beach, FL 33160

City/State and Zip Code

piedraalonso@yahoo.com.ar

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

For further information concerning this matter, please call:

Daniel O. Alonso

_,305、331-4257

Name of Person

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

(Name of the Limited)	d Liability Company as it now appears of A Florida Limited Liability Company)	n our records,)		
The Articles of Organization for this Limited Lia Florida document number L13000159717	bility Company were filed on Nov	ember 13, 2013 and assigned		
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liability company here	:		
The new name must be distinguishable and end with the w	ords "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applica	ble:	,		
(Principal office address MUST BE A STREET	ADDRESS)	Fa.		
Enter new mailing address, if applicable:		200 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or the new registered off		ur records, enter the name of the new		
Name of New Registered Agent:	Daniel O. Alonso	·····		
New Registered Office Address:	New Registered Office Address: 17145 North Bay Road #4605			
Enter Florida street address				
	Sunny Isles Beach	, Florida <u>33160</u>		
	City	Zip Code		

New Registered Agent's Signature, if changing Registered Agent:

D & A Properties of South Florida, LLC

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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alexander U. Legaz	17145 North Bay Road #460	9 5 □ Add
		Sunny Isles Beach, FL 3316	Remove
MGR	Gustavo Sergio Maller	17145 North Bay Road #460	5 ■ Add
		Sunny Isles Beach, FL 3316	Remove
		<u> </u>	Remove
			TO Add
			Remove Control
			D Add
			□ Remove
			Add
			Remove

D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary	.)	
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(The effe	ve date, if other than the date of filing: (optional) ctive date must be specific, cannot be prior to date of receipt or till te and cannot be more than 90 days after this document is filed by the Florida Department of State)		
Dated _	May 30 , 2014		
	Signature of a mentiber or authorized representative of a member		
	Alexander U. Legaz Typed or printed name of signee		
	Ally.		
	Signature of a member or authorized representative of a member		
	Gustavo Sergio Maller Typed or printed name of signee		
	Signature of a member or authorized representative of a member		
	Daniel O. Alonso	2.	
	Typed or printed name of signee		7
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	Filing Fee: \$25.00	13.23.20	
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