# L13000162498

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	ldress)	<u> </u>
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	ısiness Entity Nar	ne)
(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000253933640

12/10/13--01012--010 \*\*25.00

13 DEC 10 AMII: 44
SECRETARY OF STAFE

DEC 1 3 2013

T. BROWN

### **COVER LETTER**

TO: Registration Section
Division of Corporations

Salmon Road 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:

## Lissette Peralta

Name of Person

Firm/Company

1051 W 29 street # 2

Address

Hialeah FL 33012

City/State and Zip Code

leadingoffmanager@gmail.com

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

For further information concerning this matter, please call:

# Lissette Peralta

<sub>.,</sub>786 \**210 208**9

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

TASECRICATION AMILIAN COORDS.

#### Salmon Road LLC

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

	City	Zip Code
		, Florida
New Registered Office Address:	Enter I	Florida street address
Name of New Registered Agent:		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office		records, <u>enter the name of the new</u>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
Enter new mailing address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new principal offices address, if applicabl	e:	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company,"	the designation "LLC" or the abbreviation
A. If amending name, enter the new name of th	e limited liability company here:	
This amendment is submitted to amend the followi	ng:	
Florida document number L13000162498	·	
The Articles of Organization for this Limited Liabi	lity Company were filed on 11/20	2013 and assigned
		•

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>	Address	Type of Action
MGRM	Siete Lagos S.A.S.	Carrera 53 #17 A 39	Add
		Bogota, BO.0000 CO	Remove
MGRM	Siete Lagos Corp.	3755 W 11 AVE	Add
		Hialeah FL 33012 US	Remove
MGR	German D. Gomez	1051 W 29 St. #2	Add
		Hialeah FL 33012 US	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
11/	27/2013
d 117	<u>2112013                                 </u>
	D. H. O st
	Lissette Revolter
	Signature of a member or authorized representative of a member
	Lissette Peralta/MGR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00