L13000167682

(Requestor's Name)	
,	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Sta	tus
Special Instructions to Filing Officer:	





800254581448

12/12/13--01008--023 **55.00

DEC 1 3 2013 T HAMPTON

COVER LETTER

TO: Registration Section

Division of Corporations

ALBERICO INVESTMENTS 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:

HUMBERTO MARCANO

Name of Person

ALBERICO INVESTMENTS LLC

Firm/Company

511 SE 5TH AVE SUITE #3

Address

FT. LAUDERDALE FL 33301

City/State and Zip Code

HMARCANO@ALTAMARFOODS.COM

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

For further information concerning this matter, please call:

ALBERTO PESCATORE

at (954) 845-9690

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

Certified Copy
(additional copy is enclosed)

■\$55.00 Filing Fee &

□\$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

ALBERICO INVESTMENTS 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 Compani	y were filed on 12/03/2013	and assigned
Florida document number L13000167682		7 28
This amendment is submitted to amend the following:		FILE 2013 DEC 12 P
A. If amending name, enter the new name of the limited lia	ibility company here:	器 一 团
,	······································	PH IZ
The new name must be distinguishable and end with the words "Lir	nited Lighility Company " the design	
"L.L.C."	miled Liability Company, the desig	mation 1520-of the above viation
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 energistered agent and/or the new registered office address he		, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>	

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
MGR	ENRIQUE UMANA	511 SE 5TH AVE SUITE #3	Add
		FT. LAUDERDALE FL 33301	Remove
MGR	NUNZIA TARANTINI	511 SE 5TH AVE SUITE #3	Add
		FT. LAUDERDALE FL 33301	Remove
		TACCAE ASSES. F.	Add Framove Remove
		LORIDA DA	Add Remove
			Add Remove
			Add Remove

D. If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if nec	essary.)
·		8.9
Dated 12/09	2013	
Nunzia	9 Tarantini	
	Signature of a member or authorized representative of a member	
NUNZIA TA	RANTINI	
	Typed or printed name of signee	

_ Page 3 of 3 ____

Filing Fee: \$25.00

FILED
2013 DEC 12 PM 12: 21
SECREMENT STATES