13000170203

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	∏ WAIТ	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		į

Office Use Only



800259248488

04/24/14--01011--010 **25.00

2014 APR 24 PM 15 50
SECRETARY OF STATE
TALL AHASSEF, FLORIDA

APR 2 9 2013

T. HAMPTON

COVER LET,TER

10.	Division of Corpo			
SUBJE	T. DANIE	ELA RODRIG	JUES, LLC	
50252			ited Liability Company	
The encl	osed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspond	dence concerning this matter	to the following:	
		Jerrell Bresl	in, Esq.	
			Name of Person	
		Baron Bresli	in Sarmiento)
		•	Firm/Company	
		501 NE 1st	Ave, Suite 20	01
			Address	
		Miami, FI 33	132	
			City/State and Zip Code	*
		jb@richardbaron	law.com to be used for future annual re	
		·		sport notification)
For furth	er information con	cerning this matter, please ca	all:	
Jerr	ell Bresl	in	_{at} (305) 57	77-4626
	Name of I	'erson	Area Code	Daytime Telephone Number
Enclosed	l is a check for the	following amount:		
\$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DANIELA RODRIGUES, LLC		
(<u>Name of the Limited Liability (</u> (A Florida Lii	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number L13000170203	npany were filed on 12/09/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and end with the words "Limite	ed 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 ADDRES	<u> </u>	TALL TALL
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TALLAHASSEE, FLORE
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	•
	City	a 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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member <u>Title</u> **Name** <u>Address</u> Type of Action 6957 NW 109TH AVENUE CANADA Daniela Rodrigues MGR **DORAL, FL 33178 ■** Remove 6957 NW 109TH AVENUE **MGR** Maria Daniela Dias Rodrigues **DORAL, FL 33178** □ Remove □ Add ☐ Remove ☐ Add □ Remove

Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	optional) out be more than 90 days after
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	
	ot be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00

2014 APR 24 PM & 51
SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE