13000:174001

(Requestor's Name)
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2011 NOV -2 P 3 12

NOV 19 2010 To LEVOLT OF



COVER LETTER

TO:	Registration Sec Division of Corp		v.	
SUBJE		IA MODERN INTERNATIO	NAL LLC	
		Name of Lim	ited Liability Company	
The enc	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspoi	ndence concerning this matter	to the following:	
		IVON GALLO		
		NOVI FINANCIAL INC	Name of Person	
			Firm/Company	
		3800 INVERRARY BLVE SUITE 408-O		
		LAUDERHILL, FL 33319	Address	
		IVON GALLO	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For furt	her information co	oncerning this matter, please ca	all:	
IVON (954 818-8548 at ()	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for th	e 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

FILED

MOBILIARIA MODERN INTERNATIONAL LLC

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

Child NUV - 2 P 3 12

The Articles of Organization for this Limited Liability Company	were filed on 12/17/2013 and assigned
Florida document number 1.130000174001	• 6
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4400 SW 20 AVE #3212
(Principal office address MUST BE A STREET ADDRESS)	GAINESVILLE, FL 32607
Enter new mailing address, if applicable:	4400 SW 20 AVE #3212
(Mailing address MAY BE A POST OFFICE BOX)	GAINESVILLE, FL 32607
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	·
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City 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 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>	Address	Type of Action
MGR	GABRIEL A RODRIGUEZ	4400 SW 20 AVE #3212 GAINESVILLE, FL 32607	= Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			□ Remove
			□ Change
			Add
		-	□ Remove
			Change

	
	r than the date of filing: (optional) the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.03
te: If the date inserted	d in this block does not meet the applicable statutory filing requirements, this date will not be listed to on the Department of State's records.
	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier r the record is filed.
ed	2018
(adim Rodinger
	Signature of a member or authorized representative of a member

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Typed or printed name of signee

Filing Fee: \$25.00