## Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 617~6383

From:

Account Name : RICHARDS & ASSOCIATES, PA.

Account Number : I20110000091 Phone : (305)858-9900 Fax Number : (305)235-0015

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Penadiaz 2007a bulbanhmet

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## ADORNUS PROJECTS LLC

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Corporate Filing Menu

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10/22/2014

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

ADORNUS PROJECTS 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:

ALEXANDER FERRAN
Name of Person
Firm/Company
7531 SW 187 STREET
Address
MIAMI, FLORIDA 33157
City/State and Zip Code
ELENADIAZ2007@BELLSOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ELENA DIAZ** 

<sub>at</sub> 305, 266-242

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)

MAJLING 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

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## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ADORNUS PROJECTS LLC	•	
(Name of the Limited Liability (A Florida	ty Company as it now agnears on our re- Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C Florida document number <u>L14000010139</u>	ompany were filed on JANUARY	21, 2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and end with the words "Lir	nited 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 ADDR	RESS)	
Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE BOX)		
D 10 V 41 V 42 V 43 V 44 V 45 V 45 V 45 V 45 V 45 V 45	tul affina adduses as our was	ands onton the name of the nu
B. If amending the registered agent and/or registered agent and/or the new registered office add		ords, enter the name of the m
Name of New Registered Agent:		······································
New Registered Office Address:		
	Enter Florida street ac	idress
		, 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

MGR = Manager

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

AMBR = Authorized Member Title Type of Action <u>Name</u> <u>Address</u> MARIA E. MEJIAS MGR 13305 SW 34 STREET MIAMI, FLORIDA 33175 MGR 11402 SW 113 PLACE CLAUDIA ANNETTE DE ZENDEGUI MIAMI, FLORIDA 33176 \_ Remove 11402 SW 113 PLACE B Add MGR GABRIEL DE ZENDEGUI MIAMI, FLORIDA 33176 Remove \_\_ Remove \_\_□ Add

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Pertive date, if other than the di	nic of filing:	(optional)
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