L14 000017669

(Red	questor's Name)	
(Add	dress)	
(Add	iress)	
· (City	//State/Zip/Phone	- #\
(Oit)	. Cator Lipri 110116	· ·· ,
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	. Certificates	s of Status
Special Instructions to F	iling Officer:	
'	J	
	,	

Office Use Only



300256047673

01/31/14--01017--020 **75.00

14 JAH 31 PH 1: 32 SECTATION DESCRIPTION DE L'ALLIAN SECTE DE L'ENTRE DE L'EN

A. STANSIE FEB 0 4 2013

COVER LETTER

TO: Registration Division of C		· · · · · · · · · · · · · · · · · · ·	
SUBJECT: UN	BIMBO LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	LUIS R. SM	ITH	
		Name of Person	
	JESSEL IN\	/ESTMENTS LL	.C
		Firm/Company	
	11402 NW 41	ST STREET SUIT	ΓE 211
	·	Address	
	DORAL FL	33178	
		City/State and Zip Code	
	LM.JESSEL@GM	IAIL.COM to be used for future annual report notified	fication)
For further information	concerning this matter, please c	•	nearion)
LUIS R. S		 _{at (} 305 ₎ 47024	129
Name	e of Person	Area Code Daytime	e 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 Fec, 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

ON RIMBO FFC			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
(is Florida Elimited Eliability Company)			
The Articles of Organization for this Limited Liability Company were filed on 01/24/2014	ar	nd assig	med
Florida document number L14000013669		_	
riorida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" of	or the abbrevia	tion "I I	
The new name must be distinguishable and end with the words. Elimited Elability Company, the designation. Elec	n me abbrevia	tion L.E	2.0.
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			

		.;- 	121,
Enter new mailing address, if applicable:	TE C	7.3	
(Mailing address MAY BE A POST OFFICE BOX)	5 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	دن	V 24
	31**		* **
	17)		1313
			, 4 MAT
B. If amending the registered agent and/or registered office address on our records, s	nter the n	ame of	the new
registered agent and/or the new registered office address here:	©7: 2•	, ()	
Name of New Registered Agent:			
	-		
New Registered Office Address:			
Enter Florida street address			
Elovi	1.		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BUFFO LTD	15620 SW 146TH AVE	_■ Add
		MIAMI FL 33133	Remove
			Remove
			Add
			Remove
			O Add
			Remove
			Add 32 Remove
			□ Add
	•		□ Remove

i amending any other information, enter ch	lange(s) nere: (Attach adattional sheets, if necessary.)
	Aug
Effective date, if other than the date of filing (The effective date must be specific, cannot be prior to dat the date this document is filed by the Florida Department	e of receipt or filed date and cannot be more than 90 days after
Dated January 24	2014
Peolo anchessi	·
•	nember or authorized representative of a member
Paolo Andreasi	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00