# 114000018510

6/25/2014

Division of Corporations

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNTANT & BUSINESS CONSULTANTS INC

Account Number : I20110000083 Phone : (305)705-7922 Fax Number : (786)353-0976

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

### **LLC AMND/RESTATE/CORRECT OR M/MG RESIGN** CITOBOR LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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Help

		COVER LETTER	
TO: Registration S Division of Co			
Citob	or LLC		
SUBJECT: OTOE		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Vanessa Du	ıran	
		Name of Person	<del></del>
	DCC Accou	nting	
	<del></del>	Firm/Company	
	300 Aragon	Ave Suite # 375	
		Address	
	Miami, FL 3	3134	
	······································	City/State and Zip Code	
	vanessa@dccacc	_	<del> </del>
		to be used for future annual report notifi	ປສເກດນ) -
	concerning this matter, please o	all:	
Vanessa D	uran	<sub>at</sub> 305, 70579	22
Name o	of Person		Telephone Number
Enclosed is a check for t	he following amount-		
S25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	CL SAN DO NILLAN ENA
_ 025.50 / milg / cc	Certificate of Status	Certified Copy (additional capy 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 2651 Executive Center Circle Tallahussee, FL 32301

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Citobor LLC				
(Name of the Limited Liability Commany (A Florida Limited Liab	es it now appears on our records.)			
The Articles of Organization for this Limited Liability Company we Florida document number <u>L14000018510</u>	re tiled on <u>02/03/2014</u>	and a	ssigne	d.
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	y company here:			
The new name must be distinguishable and end with the words "Limited Liability	Company," the designation "LLC" or the	ubbreviation	"L <b>L</b> L"	
Enter new principal offices address, if applicable:			<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		127		7 1
		<u> </u>	155	
-		- <del> </del>	_ <del></del>	
			7	
Enter new mailing address, if applicable:		-6		
(Mailing address MAY BE A POST OFFICE BOX)			<del></del>	الانه بسه.
			<u>.n</u>	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the nam	e of th	ic new
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
`	, Florida			
	City	Zip Cod	c	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office adcompany has been notified in writing of this change.	formance of my duties, and I am vided for in Chapter 605, F.S. Or	familiar w , if this do	vith and cumen	d
If Changing	g Registered Agent, Signature of New R	egistered Au	ent	

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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 = M AMBR = A	lanager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	Mario Jose Palma	5751 NW 12th Ave # 202	
		Doral, FL 33178	■ Remove
MMGR	Aranxa G. Sanchez Ramirez	5751 NW 12th Ave # 202	■ Add
		Doral, FL 33178	Remove
			Remove
			Add
			Remove
•			_□ Remove

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).	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
€.	Effective date, if other than the date of filing:
	Dated June 25 2014
	Daulal
	Signature of a member or authorized representative of a member  Vanessa Duran
	Typed or printed name of signee

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Filing Fee: \$25.00