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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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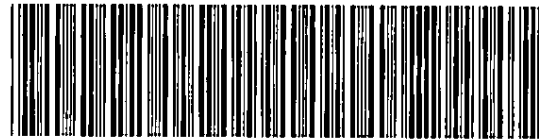
(Business Entity Name)

(Document Number)

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2018 NOV 19 PM 5:14

STATE BAR OF FLORIDA
TALLAHASSEE, FLORIDA

Anund/CC

NOV 30 2018

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 7940 WEST DR 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:

Eduardo F. Rodriguez

Name of Person

EFR Law Firm

Firm/Company

1548 Brickell Avenue

Address

Miami, Florida 33129

City/State and Zip Code

eddie@efrlawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eduardo F. Rodriguez

305 978-9340
at ()

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)

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**

7940 WEST DR LLC

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

FILED
2014 APR 19 PM 5:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 6, 2014 and assigned
Florida document number L14000021337.

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 contain the words "Limited 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 ADDRESS)

c/o EFR Law Firm

1548 Brickell Avenue

Miami, Florida 33129

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

c/o EFR Law Firm

1548 Brickell Avenue

Miami, Florida 33129

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Eduardo F. Rodriguez

New Registered Office Address:

1548 Brickell Avenue

Enter Florida street address

Miami

City

Florida 33129

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>	<u>Address</u>	<u>Type of Action</u>
MGR	GUSTAVO TRUJILLO	1548 BRICKELL AVENUE	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33129	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	VANGUARDIA HOLDINGS (BVI) LTD.	C/O EFR LAW FIRM 1548 BRICKELL AVENUE	<input checked="" type="checkbox"/> Add
		MIAMI, FLORIDA 33129	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 12 2018



Signature of a member or authorized representative of a member

Michael Pearson, as Liquidator

Typed or printed name of signee