L140000 37227

(Requestor's Name)
(requests) s riams,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decomposed Numbers)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
0
RP 2/4/10
<i>₽</i> /

Office Use Only



700282366217

02/22/16--01014--017 **30.00

SECRETARY OF STATE

WAR 2 9 2016 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: La Dulce Vicla - KPRC Sabates Ranch, LCC 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:
Consuelo Cohen Sabates Name of Person
La Dulce Vida- HPRC Sabates Banch, LLC
1002 White Drive
Delray Bch, FL 33483 City/State and Zip Code
Conniesabates@aol.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Consuelo C. Sabates at (561) 716 - 5635 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

 $(x_i - y_i)^{-1} = (x_i - y_i)^{-1}$

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



March 11, 2016

CONSUELO COHEN SABATES 1002 WHITE DRIVE DELRAY BCH, FL 33483

SUBJECT: LA DULCE VIDA - KPRC SABATES RANCH, LLC

Ref. Number: L14000037227

We have received your document for LA DULCE VIDA - KPRC SABATES RANCH, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

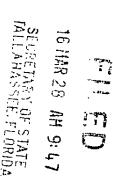
Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 316A00003832





February 24, 2016

CONSUELO COHEN SABATES 1002 WHITE DRIVE DELRAY BCH, FL 33483

SUBJECT: LA DULCE VIDA - KPRC SABATES RANCH, LLC

Ref. Number: L14000037227

We have received your document for LA DULCE VIDA - KPRC SABATES RANCH, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 316A00003832

16 MAR 28 AM 9: 47
SECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compan (A Florida Limited Liability Compan)	KPRC SAbates RANCH LLC. v as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company we Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	1002 White Drive
(Principal office address MUST BE A STREET ADDRESS)	Deliay Beach, FL 33483
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	AN THE CONTROL OF THE
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
Name of New Registered Agent:	psue lo C. SABARA
New Registered Office Address:	1000 White Duve
Delio	y Beoch , Florida 33483
New Registered Agent's Signature, if changing Registered Agent:	Zip Coae

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.

IT Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member **Title** <u>Name</u> **Address** Type of Action _□ Add _□ Remove _□ Change _□ Add □ Remove ☐ Change □ Add □ Remove ☐ Change □ Add _□ Remove _□ Change _□ Add □ Remove ○ Change _ [⊅Add 47 _□ Remove _□ Change

					
			•		
-	 				
					
			•		
				**	
					
	<u> </u>				
		iling:	of filing or more than 9	(optional) 0 days after filing.) I	Pursuant to 605.
f an effective date is liste Note: If the date inse	her than the date of fi ed, the date must be specific erted in this block does n date on the Department	ot meet the applicable st	atutory filing require	ments, this date w	ill not be liste
fan effective date is liste Note: If the date inset document's effective ne record specifie	ed, the date must be specific erted in this block does n	ot meet the applicable st of State's records. re date, but not an	atutory filing require		
fan effective date is liste Note: If the date inset document's effective ne record specifie The 90th day at	ed, the date must be specific erted in this block does not date on the Department of the action of the defectives.	ot meet the applicable st of State's records. re date, but not an	atutory filing require		
fan effective date is liste Note: If the date inse locument's effective the record specifie The 90th day at	ed, the date must be specific erted in this block does not date on the Department of ess a delayed effective fter the record is file	ot meet the applicable stoof State's records. The date, but not an ed.	effective time, at	12:01 a.m. o	n the earlie
fan effective date is liste Note: If the date inset document's effective ne record specifie The 90th day at	ed, the date must be specific erted in this block does not date on the Department of ess a delayed effective fter the record is file	ot meet the applicable st of State's records. re date, but not an	effective time, at	12:01 a.m. o	n the earlie
fan effective date is liste Note: If the date inse document's effective ne record specifie	ed, the date must be specific erted in this block does not date on the Department of ess a delayed effective fter the record is file	ot meet the applicable stoof State's records. The date, but not an ed.	effective time, at	12:01 a.m. o	n the earlie

Filing Fee: \$25.00