

L14000038240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

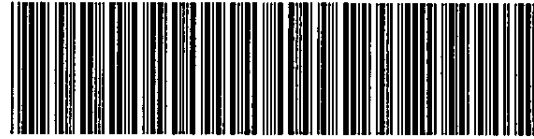
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 MAY 21 PM 2:28

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J. Stivers MAY 29 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 22, 2014

ALEJANDRO CERTAIN
9736 SW 141 DR
MIAMI, FL 33176

SUBJECT: 8000 TRINITY, LLC.
Ref. Number: L14000038240

We have received your document for 8000 TRINITY, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 614A00011104

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 8000 TRINITY L.L.C.
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:

Alejandro J. Certain
Name of Person
8000 TRINITY L.L.C
Firm/Company
9736 SW 141 DRIVE
Address
MIAMI, FLORIDA, 33176
City/State and Zip Code
certainhomes@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alejandro Certain at (786) 255-5168
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**

8000 TRINITY LLC.

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

The Articles of Organization for this Limited Liability Company were filed on March 06, 2014 and assigned Florida document number L14000038240.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

New Registered Office Address:

Enter Florida street address

Florida

City

STATE OF FLORIDA
TALLAHASSEE
14 MAY 21 PM 2:20

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
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Roberto Suhr	9661 SW 147 Street	<input type="checkbox"/> Add
		Miami, Florida, 33176	<input checked="" type="checkbox"/> Remove
AMBR	Alejandro J. Certain	9736 SW 141 Drive	<input type="checkbox"/> Add
		Miami, Florida, 33176	<input checked="" type="checkbox"/> Remove
MGR	Alejandro J. Certain	9736 SW 141 Drive	<input checked="" type="checkbox"/> Add
		Miami, Florida, 33176	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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STATE OF FLORIDA
TALLAHASSEE

11. If amending any other information, enter changes) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated May 12, 2014.



Signature of a member or authorized representative of a member

Alejandro J. Certain

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
14 MAY 21 PM 2:28
CLERK OF THE COURT
TALLAHASSEE, FLORIDA