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COVER LETTER

TO:		stration Secti ion of Corpo			
ėlib lez		Monte Vist	a LLC		
SUBJEC	L1: _		Name of Limit	ed Liability Company	
The encl	losed A	Articles of Ar	nendment and fee(s) are subn	nitted for filing.	
Please re	eturn a	ll correspond	ence concerning this matter t	o the following:	
			Gabriela Benedetto a	aka Xena Benedetto	
				Name of Person	
				Firm/Company	······
			655 W Camino Real		
			**************************************	Address	
			Boca Raton, Florida	33486	
				City/State and Zip Code	· - · · · · · · · · · · · · · · · · · ·
			xenabenedetto@gma		
			E-mail address: (to	be used for future annual report	notification)
For furth	ner inf	ormation con	cerning this matter, please cal	11:	
Kathe	rine I	McGrath		954 242 98 Area Code Da	341
		Name of Po	erson ,	Area Code Da	ytime Telephone Number
Enclosed	lis a c	heck for the I	ollowing amount:		
\$25.0	00 Fili	ing 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

Monte vista LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L14000049229</u>	ere filed on March 25 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty company here:	
The new name must be distinguishable and end with the words "Limited Liabilit	y Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
-		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	.	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter t	the name of the new
Name of New Registered Agent:		11. ≻e.π
New Registered Office Address:	L 2	14 D
	Enter Florida street address 5	0 2
	City	∠Zip ∰de
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree 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 accompany has been notified in writing of this change.	erformance of my duties, and I am fo ovided for in Chapter 605, F.S. Or, i	imiliar with and if this document is

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	HLFP LLC	260 SW Natura Ave	■ Add
		Deerfield Beach Florida 33441	□ Remove
		•	
			Remove
			□ Add
			Remove
			Add Somove
			CRETAL AHAS
			CONTRACTOR TO A CONTRACTOR
			OR ARION OR Remove
			D Add
			Remove

Effective of	late, if other than the date of filing: (optional)
(The effective	late, if other than the date of filing: (optional) date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)
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(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 effective the date this	date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)
(The effective the date this	date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State) 20(4) Signature of a member search of the date and cannot be more than 90 days after document is filed by the Florida Department of State)
(The effective the date this	date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)

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