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COVER LETTER

Divi	ision of Corp	orations '			
SUBJECT:	VALENCIA	GENERAL PARTNER, LLO	С		
SUBJECT.		Name of Lim	ited Liability Company		
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	idence concerning this matter	to the following:		
		DANIEL FERNANDEZ			
			Name of Person		
			Firm/Company		
		250 CATALONIA AVEN	UE, SUITE 600		
			Address		
		CORAL GABLES, FL 33	134		
		DANIELFERNANDEZCP	City/State and Zip Code A@GMAIL.COM	Cation)	
		E-mail address: (to be used for future annual report notifi	cation)	
For further in	nformation co	ncerning this matter, please ca	all;	70-7 o	_ _
DANIEL FE			305 392-1350 at ()		⁾
	Name of	Person	Area Code Daytime	Telephone Number	-
Enclosed is a	check for the	e following amount:	•		
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy is en	itus &

MAILING ADDRESS:

 $q_{i,i}^{\pm}$

Registration Section

TO:

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

VALENCIA GENERAL PARTNER, 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 $\frac{04/03/2014}{1}$ and assigned Florida document number $\frac{L14000055533}{L14000055533}$ 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 "LLC." 301 ALMERIA AVENUE, SUITE 330 Enter new principal offices address, if applicable: CORAL GABLES, FL 33134 (Principal office address MUST BE A STREET ADDRESS) 301 ALMERIA AVENUE, SUITE 330 Enter new mailing address, if applicable: CORAL GABLES, FL 33134 (Mailing address MAY BE A POST OFFICE BOX) 3 B. If amending the registered agent and/or registered office address on our records, enter the name for the new registered agent and/or the new registered office address here: U ÇŢ Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

. Florida

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>	Type of Action
MGR	JENNY DUCRET	301 ALMERIA AVE. STE 330	Add
		CORAL GABLES, FL 33134	Remove
			Change
			Add
			Remove
			☐ Change
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fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicable cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not a The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier
ted NOVEMBER 10 , 2015	.•
~ 1	
Signature of a member or authoriz	red representative of a member

Page 3 of 3

Filing Fee: \$25.00