

L140000S7053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FBI - NEW YORK

S. WARREN

AUG 22 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 14, 2017

MIAMI BRICKELL D8, LLC  
19262 NE 6 AVE  
MIAMI, FL 33179

SUBJECT: MIAMI BRICKELL D8, LLC  
Ref. Number: L14000057053

We have received your document for MIAMI BRICKELL D8, 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):

MISSING PAGE 3

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.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 817A00016594

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MIAMI BRICKELL DB, 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:

\_\_\_\_\_  
Name of Person  
MIAMI BRICKELL DB, LLC  
Firm/Company  
19262 NE 6 AVE  
Address  
MIAMI FL 33179  
City/State and Zip Code  
ABADIANDRES@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDRES ABADI 786 2464416  
Name of Person at Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

MIAMI BRICKELL DB, 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 4/8/14 and assigned  
Florida document number L14000057053.

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)

19262 NB 6 AVE

MIAMI FL 33179

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19262 NB 6 AVE

MIAMI FL 33179

**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:

ANDROS ABAO

New Registered Office Address:

19262 NB 6 AVE

*Enter Florida street address*

MIAMI

*City*

Florida

33179

*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	ANDRES ABADI	19262 NS 6 AVE	<input checked="" type="checkbox"/> Add
		MIAMI FL 33179	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PALMS HARBOR LLC	19262 NS 6 AVE	<input checked="" type="checkbox"/> Add
		MIAMI FL 33179	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PREMIER BUSINESS MANAGEMENT, LLC	18246 COLLINS AVE	<input type="checkbox"/> Add
		SUNNY ISLES FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated 8/22/17

Signature of a member or authorized representative of a member

ANDRES ABADI

Typed or printed name of signee

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