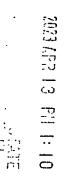
L14000057798

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Cartification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

<i>***</i>			
SUBJECT: Titina LLC	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub		
	Emma Fernandez		
		Name of Person	
	Titina LLC		
		Firm/Company	
	10345 Heritage Bay Blvd	# 2035	
		Address	
	Naples, FL 34120		- 1 23 1 23 25 25
		City/State and Zip Code	
	mpaccountingtax@yahoo.c		•
	E-mail address: (to be used for future annual report noti-	
For further information of	oncerning this matter, please c	all:	F = = = = = = = = = = = = = = = = = = =
Emma Fernandez		at (239) 465-3266	10 I
Name o	f Person	at (239) 465-3266 Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S		Street Address: Registration Sec	rtion
Division of C		Division of Cor	
P.O. Box 632	•	The Centre of T	=

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Titina LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	v as it now appears on our records.) ibility Company)	
The Articles of Organization for this Limited Liability Company w	/ere filed on 04/08/2014	and assigned
lorida document number L14000057798		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabili	ity company here:	
he new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the a	bbreviation "L.L.C."
Inter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)	4617	<u> </u>
		ယ
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		FF 0
. If amending the registered agent and/or registered office ad gent and/or the new registered office address here: Name of New Registered Agent:	ldress on our records, enter the nar	ne of the new registe
New Registered Office Address:	Cara Planta and all a	
	Enter Florida street address	
	, Florida	Zin Code
	Cin	zin Coar

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 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>	Name	Address	Type of Action
P	Zulma Kunzle	606 Sargento Gauto 606	≣ Add
		Asuncion-Paraguay	□Remove
			□Change
MGR	Emma Fernandez	10345 Heritage Bay Blvd # 2035	\dd
		Naples, FL 34120	□Remove
			= Change
MBR	Rosana Fernandez	10345 Heritage Bay Blvd #2035	
		Naples, FL 34120	□Remove
			□Change
MBR	Ana Richardson	10345 Heritage Bay Blvd #2035	= Add
		Naples, Fl. 34120	□Remove
			□Change
MBR	Osvaldo Fernandez	606 Sargento Gauto 606	€Add
		Asuncion-Paraguay	77. BRemove
			Change
			— ⊕Add
			⊤; O □Remove
			□Change

			 	
	-			