14000059159

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COVER LETTER

TO: Registration Section
Division of Corporations

Barrera Art and Investment 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:

Jose Quinonez

Name of Person

JQ Accounting Services Inc.

Firm/Company

777 NW 72nd ave Suite 3033

Address

Miami, FL 33126

City/State and Zip Code

JQTAXService@Gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose Quinonez

Name of Person

,,786,344-9226

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

Barrera Art And Investment LLC				
(<u>Name of the Limited Liabili</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)			
The Articles of Organization for this Limited Liability C Florida document number L1400059159	ompany were filed on April 10th, 2014	and a	ssigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ted liability company here:			
The new name must be distinguishable and end with the words "Lin	nited Liability Company," the designation "LLC" or th	e abbreviation	"L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	(ESS)	((28	
		<u>fö</u>	=	100 Person
		. 圣恶	70	()
Enter new mailing address, if applicable:		1537 1537 1537 1537 1537 1537 1537 1537	30	i salah M
(Mailing address MAY BE A POST OFFICE BOX)		Mag	_B	1 i
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		STATE STATE	ယ	
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on our records, enteress here:	r the name	e of the	e new
Name of New Registered Agent:				_
New Registered Office Address:	Enter Florida street address		"	
	, Florida			
	City	Zip Code	2	

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

Title	uthorized Member Name	Address 2	Type of Actio
MGR	Sergio A. Barrera	5570 NW 194th circle	Add
		Terrace, Miami Gardens	_□ Remove
		FL 33055	-
			_□ Add
		- - 7	_□_Remove
		AHE ARY	- R 30
		######################################	Add [] ဟု Remove
			□ Add
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] Remove

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ective date, if other than the	date of filing:	(optional)
date this document is filed by the Flo	orida Department of State)	not be more man 90 days arter
April 28th	, 2014	
JAIRO BARR	Signatule of a member or authorized representa	attie of a member
	Typed of printed/name of signe	e 2014
		SECRE JAR
		30 SSE
		CORRECTION OF CO

Page 3 of 3

Filing Fee: \$25.00