

03/09/2032 08:15

#3700 001/004

L140001011503

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H140001011503))



H140001011503AEN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SOMAR FAMILY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED

14 APR 28 PM 5:01

STATE
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2014 APR 29 AM 9:15

FILED

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

APR 30 2014

2014

03/09/2032 08:15

Apr 28 2014 2:04PM

QUICK ACCOUNTING

8053627253

#3240 P.002/004

P. 2

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

H14000101150**SOMAR FAMILY 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 04/16/2014 and assigned
Florida document number L14000062540

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 end with 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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 603, 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

Page 1 of 3

H14000101150

03/09/2032 06:16

#3240 P.003/004

Apr 28 2014 2:04PM QUICK ACCOUNTING

3053627253

H14000101150

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

2014 APR 29 AM 10:15
DEPT. OF STATE
EMBASSY
WASHINGTON, DC
RECEIVED

FILED

H14000101150

03/09/2032 06:16

Apr 28 2014 2:04PM QUICK ACCOUNTING

3053627253

#3240 P.004/004

P.4

H14000101150

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ARTICLE VIII MANAGEMENT OF THE COMPANY		
NAME/ADDRESS	POSITION	
ANN MARGARET RAMOS	MGR/MEMBER	
15831 NW 79 CT, MIAMI LAKES, FL. 33016	VICEPRESIDENT	41
ALEXIS RAMOS	MEMBER	
15831 NW 79 CT, MIAMI LAKES, FL. 33016	PRESIDENT	40
ALEXIS MARGARET RAMOS	MEMBER	
15831 NW 79 CT, MIAMI LAKES, FL. 33016	SECRETARY	19

E. Effective date, if other than the date of filing: _____ (optional)
(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 date this document is filed by the Florida Department of State)

Dated APRIL 24, 2014



Signature of a member or authorized representative of a member

ANN MARGARET RAMOS

Typed or printed name of signer

Page 3 of 3

FILED
2014 APR 29 AM 9:15
CLERK OF STATE
TALLAHASSEE FLORIDA

H14000101150