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.

(((H140002891163)))



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

: (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : I20000000205

: (305)416-6800

Phone Fax Number

: (305)416-6811

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

M & M LOOR INVESTMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

DEC 17 2014 1 CLINE

(((H14000289116 3)))

COVER LETTER

	Registration Sec Division of Corp			
^f/B /B @	M&ML	OOR INVESTMENT LL	.c	
SUBJEC	:r:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		Diane M. Hernande	z	
			Name of Person	
		Adams Gallinar, P.A	١.	77.00
			Firm/Company	
		1000 Brickell Avenu	e, Suite 300	2014 PEC 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		**************************************	Address	Se o
		Miami, Florida 3313	1	
			City/State and Zip Code	
		dhernandez@agilaw		F 2
For furthe	er information co	e-mail address: (oncerning this matter, please o	to be used for future annual report notif	ication)
Diane M. Hernandez Name of Person			305 416-6800	Telephone Number
	Name of	Person	Area Code Dayume	Telephone Number
Enclosed	is a check for th	e following amount:		
*** \$25 ,0	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)
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations x 6327 ssee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations oter Circle

PAGE 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		ESTMENT LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited	ny as li now annears on our records.) Liability Company)				
The Articles of Organization for this Limited L. Florida document number L14000066499	iability Company	were filed on 04/23/2014	and a	ssigned		
This amendment is submitted to amend the following	owing:		.49	P-3		
A. If amending name, enter the new name o	f the limited liab	ility company here:		景	14 A.M	
The new name must be distinguishable and end with the	words "Limited Liat	nility Company," the designation "LLC" or	the abbreviation	"L.L.C."	21. e 3	
Enter new principal offices address, if applic	able:		<u> </u>	ص —	_; _\$**f**	
(Principal office address MUST BE A STREE	TADDRESS)		~ ()	nin'r	uphen 4,	
			100	- (3)		
			ite.	en .		
Enter new mailing address, if applicable:		1000 Brickell Avenue		···		
(Mailing address MAY BE A POST OFFICE	BOX)	Sulte 300				
		Miami, Florida 33131				
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	Mce address her	ffice address on our records, <u>en</u> e: ared Agents, Inc.	ter the nam	e of the	: new	
New Registered Office Address:	1000 Bricke	ell Avenue, Suite 300				
		Enter Florida street address			-	
	Miami	Florida	33131	•		
New Registered Agent's Signature, II changing I	Registered Agent:	City	Zip Cod	e	_	
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the scampany has been notified in writing of this company has been notified in writing of this	d agent and agr er and complete stered agent as p registered office change.	ee to act in this capacity. I further performance of my duties, and I do provided for in Chapter 605, F.S. address, I hereby confirm that the ging Registered Agent Signature of New	um familiar w Or, if this doc e limited liab	vith and cument i ility		

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>	Name	Address	Type of Action
MGR	M&M Management Group, LLC	. 1000 Brickell Avenue	■ Add
		Suite 300	☐ Remove
		Miami, Florida 33131	
MGR	Miguel Loor	9660 Fontainebleau Blvd	
		Unit 12	Remove
		Miami, Florida 33172	
MGR	Michelle Loor	9660 Fontainebleau Blvd	D Add
		Unit 12	Remove
		Miami, Florida 33172	
·————			□ Add
			□ Rémove
			□ Add
			□ Remove
			D Add
			□ Remove

1	2/	1	6/	2014	16:	30

16:38 3054166811

ADAMS GALLINAR PA

PAGE 05/05

		(((11140	00289	110 3)))
D. If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary,)		
-				
-		- 		
-				
-				
_				
(The eff)	ive date, if other than the date of filing:			
Dated	December 15 2014			
	Radarul			
	Signature of a member or supported representative of a member	12 (7)	2	
	Robert R. Adams, Esq., Authorized Representative	1 + 11	2814	
	Typed or printed name of signee			* * * * * * * * * * * * * * * * * * * *
		1>		HS14 A 24
		417-C	O)	i Inner
		gree Fee	TP.	į
			(R)	₩ Privata N
		ي ما يون و ما يون	()	

Page 3 of 3

Filing Fee: \$25.00