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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration So Division of Con		•	¥	
SUBJECT:	Terrazzo De	evelopment, LLC		
Soujeci.	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub ondence concerning this matter			
	v	ictoria Pineros		
		Name of Person		
		Terrazzo Development, LLC		
		Firm/Company		
		1330 West Ave #2206		
		Address	<u> </u>	7. ZS
		Miami Beach, Fl 33139	7	LANASSE LANASSE
		City/State and Zip Code		2 PP
	E mail address:	victoria@terrazzocapital.ne to be used for future annual repor	ા	五五
For further information of	concerning this matter, please c	-	, inclined and inc) AH 3: 25
Viete	oria Pineros	~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~	206-0935	-
Name o	of Person	Area Code Da	sytime Telephone Number	
Enclosed is a check for t	he 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)	
MAIL	ING ADDRESS:	STREET/CO	URIER ADDRESS:	

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Terrazzo Development, LLC		
(Name of the Limite	ed Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Li	ability Company were filed on 05/14	1/2014	and assigned
Florida document numberL14000078346	<u> </u>		
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company here:	:	
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the desig	gnation "LLC" or the	abbreviation L.L.C.
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		2 SEAL
			irigic
			4 95
Enter new mailing address, if applicable:			2 85
(Mailing address MAY BE A POST OFFICE)	BOX)		

B. If amending the registered agent and/or the new registered of		ur records, <u>ente</u>	r the name of the new
Name of New Registered Agent:	Victoria Pineros		
New Registered Office Address:	1330 West Ave #2206		
	Enter Florida	street address	
	Miami Beach	, Florida _	33139
	City		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>	Address	Type of Action
MGR	Jordan Suppan		
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an effective dat	e, if other than the is listed, the date m	ust be specific an	id cannot be pric	or to date of filing	or more than 90	(optional) days after filing	.) Pursuant to 605	.0207 (3)
ote: If the da	ate inserted in this	block does not	meet the appli	cable statutory	filing requirer	nents, this date	will not be liste	ed as the
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		Simulation 202		X	otivo o Co manul			
		Signature of a	member or aut	horized represent	auve or a memb	ocr		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00