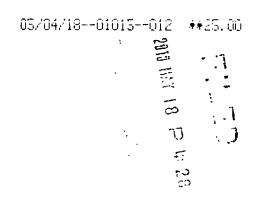


(Requ	estor's Name)	
(Addre	:55)	
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•	·	
(City.)(C	tota (Zin/Dhan	
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Certified Copies	Certificate	s of Status
		···
Special Instructions to Fili	ng Officer:	

Office Use Only



700312767397



ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

DEBLE	akout.	LLC			
(<u>Name of the Limite</u> (d Liability Company as A Florida Limited Liabili	it now appears (ty Company)	on our records.)		
The Articles of Organization for this Limited Lia	ability Company were	e filed on	9/22/14	and assigned	
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	· .	company here	<u>.</u> : -		
The new name must be distinguishable and contain the wo	/ 	ompan√" the des	ignation "LLC" or the	ubbreviation "L.L.C."	_
Enter new principal offices address, if applica		•	-	CT SUITE	<u> 1</u> 0,
(Principal office address MUST BE A STREET	ADDRESS)	HANI,	FL. 33	186	
	·	· · ·		2911 1/17	
Enter new mailing address, if applicable:		-	2 .		
(Mailing address MAY BE A POST OFFICE E	<u></u>		 ·	. 5	
·	· · · · —	<u> </u>	<u> </u>		
B. If amending the registered agent and/oregistered agent and/or the new registered off		address on o	our records, <u>enter</u>	the name of the	e new
Name of New Registered Agent:	VICTOR 7	F. SEI	MS JR	•	
New Registered Office Address:	14395 5.	Enter Florid	139 OT.	SUITE /	0/
	MIANI		Florida	33186	
New Registered Agent's Signature, if changing R		City .		Zip Code	_

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 = Max $AMBR = Auc$	nager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR.	VICTOR F. SEIJASJR	10221 SW 1345T.	D Add
		MIANI FLA 33176	Remove
			Change
MGR	CECILIA SEIJAS	10221 S.W. 13451	Dxdd
		MIAMI, FL. 33176	□ Remove
			Change
	DOBORA M. RAMSEY	5085 NW 7.5T. APARTHENT 1514 TOLLE	Add
	APARTHENT 1514 TOLLE	3 th Remove	
		41 AUI, FL. 33126	Change
			≥ □ Add
			7
			Remove
			Change
			S □ Add
			Remove
			Change
	· · · · · · · · · · · · · · · · · · ·		
			□ Remove
			7 /7

VICTOR F. SEIJAS J		MGR			
10221 S.W 1345T		17(0)			
	-				
M/AM/ FL. 3317	- <u> </u>	· · · · · · · · · · · · · · · · · · ·			
CECILIA M. SEIJA	3	MGR			
10221 5.W. 134	51.				
MIAMI, FL. 331	76				
				~9	
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				47	}
				<u>73</u>	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be ote: If the date inserted in this block does not meet the a ocument's effective date on the Department of State's recomment.	e prior to date of applicable stat		days after filing	.) Pursuan	
e record specifies a delayed effective date, bu The 90th day after the record is filed.	it not an ef	fective time, at	12:01 a.m.	on the	earlier o
ated $\frac{4/34/18}{\sqrt{18}}$,			
Signature of amember of VICTOR F	authorized rep	resentative of a memb	per		
111 16 -		71-)		

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Filing Fee: \$25.00