## #1 140000 92283

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SECREDARY OF STATE

K.SALY EXAMINER JUN -1 2015

## **COVER LETTER**

TO: Registration Section Division of Corpor			
SUBJECT: RIC	ANA, LLC Name of Limite	d Liability Company	<del></del>
The enclosed Articles of Am	endment and fee(s) are submi	tted for filing.	
Please return all corresponde	nce concerning this matter to	the following:	·
	RICAN	DO ZIEMER Name of Person	
		Name of Person	
	RIC	& ANA, LLC Firm/Company	
•		Firm/Company	<del></del>
	225	WILD TAMARINE	BLVD
	01	LLANDO /FL 3Z 9	728
-	RICAN E-mail address: (to	DO R ZR BOMBAS. Cope used for future annual report notificat	COM.BR
For further information conce	arning this matter places calls		
RICARDO ZI	emen.	+ 55 (II) 4426- Area Code Daytime Te	7632
Name of Per	son	Area Code Daytime Te	lephone Number
Enclosed is a check for the fo	ollowing 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 ARTICLES OF ORGANIZATION **OF**

FILED 2015 MAY 26 PH 2: 40

(Name of the Limited Liability Compa (A Florida Limited)		HASSEE, FLORID.
The Articles of Organization for this Limited Liability Company Florida document number <u>L140000 92283</u>	·	214 and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab  NA  The new name must be distinguishable and contain the words "Limited Liabileter".		
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	1	TAMARIND BLUD
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	NA 2257 WILD - ORLANDO, FL	TAMARIND BLVD 32828
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		iter the name of the nev
Name of New Registered Agent:	CICARDO ZIEMER	
New Registered Office Address:	2257 WILO TAMA  Enter Florida street address	RIND BLVD
<del></del>	ONLANDO, Florida	32828 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

Page 1 of 3

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> **Name** <u>Address</u> **Type of Action** AR 2257 WILD TAMARIND BLVD FERNAND ZIEMER ORLANDO, FL 32828 Remove ☐ Change AMBR RICARDO ZIEMER 2257 WILD TAMARIND BLVD DAD ORLANDO, FL 32828 □ Remove Change AMBR ANA MARIA RIBEIRO ZIEMER 2257 WILD TAMARIND BLUD DAD ORLANDO, FL 32828 Change □ Add ☐ Remove ☐ Change Remove Change ☐ Remove □ Change

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