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H150000547613**ABC\$** 

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From:

Account Name : CORP USA

Account Number : 072450003255 Phone : (305)634-369

Fax Number

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRUPO HABITA, LLC

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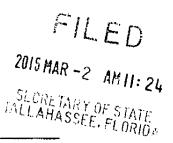


## COVER LETTER

	Registration Se Division of Cor				
erro inc		HABITA, LLC			•
SUBJEC	·1;	Name of Lin	rited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:	,	
		Gryska Sotolongo		~£	
			Name of Person		<del></del>
		Thomas G. Sherma	n, P.A.	•	
			Firm/Company		<del></del>
		90 Almeria Avenue			•
			Address		_
		Coral Gables, FL 33	134		
			City/State and Zip Code	-	_
		E-meil address: (	to be used for future annual repor	t notification)	
For furthe	er information c	oncerning this matter, please c	all:	$\mathcal{H}^{\mathcal{D}_{\mathcal{A}}}$	
Gryska	Sotolonfo		305 448-5	898	
	Name o	f Person	at ()	aytime Telephone Numbe	it.
Enolosed	is a check for th	ne following amount:			
<b>■ \$25.</b> 0	00 Filing Fee	S30.00 Filing Fae & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ix 6327 ssee, FL 32314	Registration S Division of Co Clifton Buildi	Orporations	

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



GRUPO HABITA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

<del></del>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liable	lity compan	y bere:		
he new name must be distinguishable and end with the words "Limited Liahi	lity Company,"	the designation "	LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del> -			
Principal office address MUST BE A STREET ADDRESS)				
		•		
nter new mailing address, if applicable:		<del></del>		
Mailing address MAY BE A POST OFFICE BOX)		· • · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·		
3. If amending the registered agent and/or registered off		on our reco	rds, enter	the name of the
egistered agent and/or the new registered office address hero	!	;		
		* A		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter	Florida street add	ress	, , , <u>, , , , , , , , , , , , , , , , </u>
	, Florida			
· · · · · · · · · · · · · · · · · · ·	City	, , ,		Zip Code

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 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

Title	Name	Address	Type of Action
MGR	Franciso Rodriguez	605 West Flager Street	<b>=</b> Add
		Miami, FL 33130	□ Remove
MGR	Lourdes Castellon	605 West Flagler St.	Add
		Miami, FL 33130	□ Remove
AMBR	Jacob Abdel, LLC	605 West Flagler St.	🖾 Add
		Miami, FL 33130	■ Remove
AMBR	G3 Partners, LLC	605 West Flager St.	
		Miami, FL 33130	Remove
		,	Remove  2015 HAR-2  Remove  1 Add Soft Floor Silver
			Rediove 25
			П Rетюче

Page 2 of 3

). If amending any other information, enter change(s) here	e: (Attach additional sheets, if necessary.)
. Effective date, if other than the date of filing:	(optional)
(The effective date must be specific, cannot be prior to date of receipt or the date this document is filed by the Florida Department of State)	iled date and cannot be more than 90 days after
Dated February 19 , 2013	<del>_</del> ·
Sibadana of a my where of duth	orized representative of a member
Thomas G. Sherman, Esq.	prized representative of a member
	ed name of signee

Page 3 of 3
Filing Fee: \$25.00

