

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 8407 DORAL LLC

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Corporate Filing Menu

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CORPUSA

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N. Guttigan JUN 1.7 2014





## TO SECRETARY OF STATE ARTICLES OF ORGANIZATION TALLAHASSEE, FLORIDA **OF**

8407 DORAL LLC		
(Name of the Limited Light (A Flori	hity Cempany as it now appears on our recurds.) dis Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L14000095355	Company were filed on 06/13/2014 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and end with the words "I	Limited Liability Company," the designation "LLC" or the abbreviation "LLC."	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regrestered agent and/or the new registered office ad	jistered office address on our records, enter the name of the new	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street address	
	Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Regists	red 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 Revistored Agent

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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;

AMBR = Authorized Member Title Name <u>Address</u> Type of Action MGR FERNANDO J. JIMENEZ 11402 NW 41ST STREET SUITE 211-518 □ Add **DORAL FL 33178** Remove MGR F & S7 INVESTMENTS LLC 11402 NW 41ST STREET SUITE 211-518 **DORAL FL 33178** □ Remove \_D Add \_ Ramove \_□ Add \_□ Remove ☐ Add \_ REDOVE \_D Add 

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MGR = Manager

. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:  (The effective date must be specific, cannot be prior to date of receipt or file the date this document is filed by the Florida Department of State)	(optional) ed date and cannot be more than 90 days after
Dated June 16 , 2014	_•
F. J. Limenez Signatural of a member of author	_
Signature of a member or author	rized representative of a manuber
Fernando J. Jimenez	
Typed or printed	name of signee

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Filing Fee: \$25.00

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