

L14000112662

**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

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Account Number : I20120000076
Phone : (305) 361-6161
Fax Number : (305) 361-6168

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Email Address:

lpsalazar@law@aol.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VIEW WEST 1109, LLC**

Certificate of Status	0
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14 AUG 20 AM 10:16

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Fax:

Aug 20 2014 04:20pm P002

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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VIEW WEST 1109, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 7/16/2014

Florida document number L14000112662

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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2101 BRICKELL AVENUE

SUITE 1908

MIAMI, FLORIDA 33129

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2101 BRICKELL AVENUE

SUITE 1908

MIAMI, FLORIDA 33129

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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

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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:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	HANDSTONE MANAGEMENT CORP.	1723 SW 2 AVE., STE. 1109	<input type="checkbox"/> Add
		MIAMI, FL 33129	<input type="checkbox"/> Remove
MGR	ANDRES E. GALLEGOS	2101 BRICKELL AVE.	<input type="checkbox"/> Add
		SUITE 1908	<input type="checkbox"/> Remove
		MIAMI, FL 33129	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 STATE OF FLORIDA
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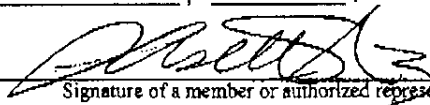
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: AUGUST 20, 2014 (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated AUGUST 20, 2014



Signature of a member or authorized representative of a member

LISETTE PIE SALAZAR

Typed or printed name of signee

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