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T. BROWN

NEĽSON SLÓSBERGĄS, P.

SUITE 3TO

MIAMI, FLORIDA 33131

E-MAIL ADDRESS nelson@miami-intl-law.com
WEB PAGE www.miami-intl-law.com

NELSON SLOSBERGAS
ATTORNEY AND CIVIL LAW NOTARY

(305) 374-0030 FAX (305) 374-2855

November 19, 2014

Secretary of State
Registration Section/Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: S. PAUL GALLERY LLC

Dear Sir or Madam:

Please find attached the Limited Liability Company Articles of Amendment to Articles of Organization of S. Paul Gallery LLC, and check for the filing fee in the amount of \$25.00.

Kindly return the letter of acknowledgment in the attached *federal express envelope*, once the amendment has been filed.

Thank you for your attention to this matter.

Very truly yours,

Rita Salgado

Corporate Legal Secretary

[Direct E-Mail: rita@miami-intl-law.com]

Enclosures (as noted)

VIA FEDEX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF A	AMENDMENT	
ARTICLES OF O	RGANIZATION ATTEMPTED	
S. Paul Galle	erv LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL14000121331	August 1, 2014	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2527 NW 2nd. Ave.	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33127	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent:		
New Registered Office Address:		
· · · · · · · · · · · · · · · · · · ·	Enter Florida street address	
	, Florida	
	City 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

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:

	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			□ Remove
			Add
			☐ Remove
			Add
			Remove
			☐ Remove
			
			Add
			☐ Remove

D.	If antei	rding any other informatio	n, enter change(s) here: (Attach additi	onal sheets, if necessary.)
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(The	(The effec	ve date, if other than the da tive date must be specific, cannot be this document is filed by the Floric	te of filing: be prior to date of receipt or filed date and cannot la Department of State)	(optional) be more than 90 days after
	Dated_	November 19	2014	
			A.	
		Si	gnature of amember or authorized representative Valeria Fregonez Musumed	
			Tread a printed some of signer	ار

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