

L14000130407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

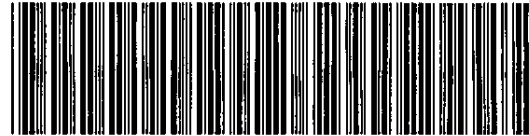
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FILED
2014 SEP 18 PM 4:30
U.S. DISTRICT COURT
NORTH DAKOTA
FARGO

September 16, 2014

FLORIDA DEPARTMENT OF STATES
REGISTRATION SECTION
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

To Whom It May Concern,

Please be informed that we are only making a correction on the Limited Liability Company.

Through this amendment, we are correcting the following typos made on the name of:

- 1- Registered Agent Signature
- 2- Manager
- 3- Authorize Representative Electronic Signature

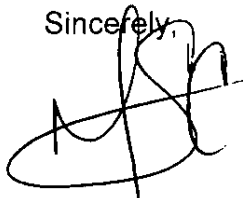
The corrections are as follows:

- 1- MIGUEL A. SERINO COLANTUONI as Registered Agent Signature
- 2- MIGUEL A. SERINO COLANTUONI as Manager
- 3- MIGUEL A. SERINO COLANTUONI as Authorize Representative Electronic Signature

Please, kindly correct the above mentioned name as soon as possible.

Thank you in advance for your cooperation and assistance in processing these changes.

Sincerely,



Miguel A. Serino Colantuoni
Florida Paper II, LLC

FILED
28 SEP 18 PM 4:30
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **FLORIDA PAPER PLUS II, LLC.**

Name of Limited Liability Company

FILED
2614 SEP 18 PM 4:30
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIGUEL A. SERINO COLANTUONI

Name of Person

FLORIDA PAPER PLUS II, LLC.

Firm/Company

7791 NW 46 ST. SUITE 103

Address

DORAL, FL 33166

City/State and Zip Code

AMLCZU@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIGUEL A. SERINO COLANTUONI at **(786) 315-3045**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
TO
ARTICLES OF ORGANIZATION
OF**

FLORIDA PAPER PLUS II, 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 AUGUST 20, 2014 and assigned
Florida document number L14000130407.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

MIGUEL A. SERINO COLANTUONI

New Registered Office Address:

7791 NW 46 ST. SUITE 103

Enter Florida street address

DORAL

City

, Florida 33166

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MIGUEL A SERIO COLANTUONI	7791 NW 46 ST. SUITE 103	<input type="checkbox"/> Add
		DORAL, FL 33166	<input checked="" type="checkbox"/> Remove
MGR	MIGUEL A. SERINO COLANTUONI	7791 NW 46 ST. SUITE 103	<input checked="" type="checkbox"/> Add
		DORAL, FL 33166	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

2014 SEP 18 PM 4:30
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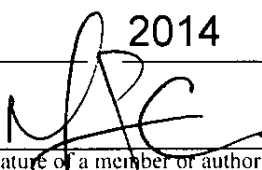
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

PLEASE SEE ATTACHEMENT

E. Effective date, if other than the date of filing: _____ (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 SEPTEMBER 16 2014



Signature of a member or authorized representative of a member

MIGUEL A. SERINO COLANTUONI

Typed or printed name of signee

FILED
2014 SEP 18 PM 4:30
CLERK OF THE
COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA