

L14 000172855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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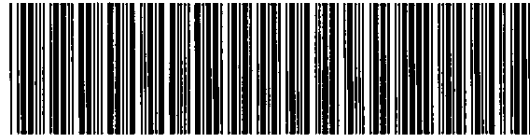
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/16/2014 OCT 16 2014

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **Cinetico, LLC**

\_\_\_\_\_  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

**Angel Zambrano**

\_\_\_\_\_  
Name of Person

**Cinetico LLC**

\_\_\_\_\_  
Firm/Company

**2133 Calais Drive #12**

\_\_\_\_\_  
Address

**Miami Beach, Florida 33141**

\_\_\_\_\_  
City/State and Zip Code

**gustavoz@mac.com**

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

For further information concerning this matter, please call:

**Angel Zambrano**

**323 4535262**

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$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**

Cinetico 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 08/26/2014 and assigned  
Florida document number L14000132855.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Cinetico LLC

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)**

2133 Calais Drive #12

Miami Beach, FL 33141

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2133 Calais Drive #12

Miami Beach, FL 33141

**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:

Ysabel Aranguren

New Registered Office Address:

2133 Calais Drive #12

Enter Florida street address

Miami Beach

, Florida 33141

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.*

  
Ysabel Aranguren  
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	Angel Zambrano	2133 Calais Drive #12	<input checked="" type="checkbox"/> Add
		Miami Beach, FL 33141	<input type="checkbox"/> Remove
MGR	Ysabel Aranguren	2133 Calais Drive #12	<input checked="" type="checkbox"/> Add
		Miami Beach, FL 33141	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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ALABAMA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Correction on misspelled NAME. Isabel to be changed for Ysabel.

Change from CEO/ CFO to MANAGERS

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 October 9th, 2014



Signature of a member or authorized representative of a member

Angel Zambrano

Typed or printed name of signee

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Filing Fee: \$25.00

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