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OF WE

COVER LETTER

TO: Registration Section Division of Corporation	ns	
Monterey	Villas, LLC	
SUBJECT:	Name of Limited Liability Company	
	nent and fee(s) are submitted for filing.	
Ra	andell Simson	
<u></u>	Name of Person	
	Firm/Company	22
41	23 LeJeune Rd	2014 SEP 29
	Address	型 2
Mi	iami, FL 33146	F77
rand	City/State and Zip Code	PH 12: 09
	E-mail address: (to be used for future annual report notification)	36. 6
For further information concerning	g this matter, please call:	,*
Randell Simpso	on _{at} 305, 542-2583	
Name of Person	Area Code Daytime Telephone Number	
Enclosed is a check for the follow	ing amount:	
	(additional copy is enclosed) Certified (e of Status &

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

Monterey Villas, LLC		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our rec da Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Florida document number L14000137321	Company were filed on 9/3/14	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
The new name must be distinguishable and end with the words "I	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 ADD	ORESS)	71: 5.7
Enter new mailing address, if applicable:		No.
(Mailing address MAY BE A POST OFFICE BOX)		
		52. 75 70%
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		rds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
· ·	Enter Florida street add	dress
		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, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mr	Eric Yerina	1745 SW 13 Ave	
		Miami, FL 33145	Remove
	,		Add
			Remove
	<u></u>		□ Add
		<u></u>	□ Remove
			2014 SEP 29
			29 Premove: 09
			□ Add
			Remove
			Add
	,		□ Remove
	•		

حننيه	ding any other information, enter change(s) here: (Attac	,,,,,
had		
The effect	e date, if other than the date of filing:	(optional) ad cannot be more than 90 days after
	his document is filed by the Florida Department of State) 0/23/14	
	Signature of a member or authorized repri	esentative of a member

Page 3 of 3

Filing Fee: \$25.00

2014 SEP 29 PH 12: 09