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## . COVER LETTER

Registration Section

TO:

Division of Cor	rporations		
HERRERA	FAMILY HOLDINGS LLC	1	
SUBJECT:	•		
	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	RAUL HERRERA		
		Name of Person	
	HERRERA FAMILY HOI	LDINGS ELC	
		Firm/Company	
	P.O. BOX 143941		
		Address	
	CORAL GABLES, FL. 33	3114	
	RAULH@SPECIALIZED	City/State and Zip Code TOWINGFL.COM	
	E-mail address: (	(to be used for future annual report notification)	
For further information of	concerning this matter, please c		
RAUL HERRERA	toncerning and matter, preade e	305 986-1642	
		at () Area Code Daytime Telephone Number	. <u>.                                   </u>
Name o	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &
<u>Mailing Addre</u>	<u>ss:</u>	Street Address:	
Registration	Section	Registration Section	
Division of C	-	Division of Corporations	
P.O. Box 637 Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, Suite 8	10
rananassec.	1 L JEJ 17	Tallahassee, FL 32303	``/

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22.5\_ -1 12.00:03

## HERRERA FAMILY HOLDINGS 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	/2014	and assigned
Florida document number L14000138636			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company." the design	gnation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:	14825 SW 137 ST.	. #3	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, Fl., 33196	6	
		<del></del>	<del></del>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our reco	ords, <u>enter the name o</u>	the new registered
Name of New Registered Agent:			<del></del>
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my provided for in Che	y duties, and I am fam apter 605, F.S. Or, if t	iliar with and his document is
company nas veen noujiea in writing of this change.			

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 4123 \$1 87 1 19193	Type of Action
MGR	RAUL HERRERA	P.O. BOX 143941	□Add
		CORAL GABLES, FL. 33114	
			□Remove
			Change
			□Add
			□Remove
			□Change
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