

L14000151470

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000094655 3)))



H150000946553ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 7345 L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

REC'D
15 APR 17 AM 10:00

BUREAU OF CORPORATE
INFORMATION SERVICES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 APR 17 AM 8:22

FILED

APR 20 2015
J. HARRIS

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

7345 L.L.C.

(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 09/29/2014 and assigned Florida document number L14000151470.

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:

7721 SW 56 Avenue, Apt A, Miami, FL 33143

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

P.O.Box 141511

(Mailing address MAY BE A POST OFFICE BOX)

Coral Gables, FL 33114

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:

New Registered Office Address:

Enter Florida street address

City, Florida

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	SIGLER, ANA L	7734 SW 54 AVE	☐ Add
		MIAMI, FL 33143	☒ Remove
AMBR	SIGLER, MELISSA	7734 SW 54 AVE	☐ Add
		Miami, FL 33154	☒ Remove
AMBR	Platinum Real Property Ventures LLC	7721 S.W. 56 Ave., Apt# A	☒ Add
		MIAMI, FL 33143	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

2015 APR 17 AM 8:22
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

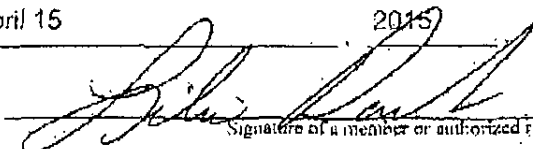
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 April 15

2015



Signature of a member or authorized representative of a member

Lilia Pardo

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED

2015 APR 17 AM 8:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA