To: 8506176383

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.

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To:	Division of Corp Fax Number :	orations (850)617-6383		HASSE
From:	Account Number : Phone	IDEAS CARVAJAL LL 120220000006 (321)333-5565 (407)520-5473	c .	STATE E. FL
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## **COVER LETTER** Registration Section

TO: Division of Corporations AIC FLORIDA LLC SUBJECT: 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: ALVAREZ, NILSON Name of Person PRESIDENT Firm/Company 181 WESTMORELAND CIR KISSIMMEE, FL 34744 City/State and Zip Code KARENMANZOLAC@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter please call: 591-2300 AJ.VAREZ, NILSON Daytima Telephone Number Name of Person Enclosed is a check for the following amount: S60.00 Filing Fcc, ☐ \$55.00 Filing Fee & □ \$30.00 Filing Fee & \$25,00 Filing Fcc Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Nathing Address: Street Address: Registration Section Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION  OF  AIC FLORIDA LLC  (Name of the Lamited Liability Company as it now appears on our regards;)  (A Florida Limited Liability Company):  The Articles of Organization for this Limited Liability Company were filed on 10/15/2014 and assign	
AIC FLORIDA LLC  (Name of the Lamited Liability Company as it now appears on our regords;) (AT lorids Limited Liability Company):  The Articles of Organization for this Limited Liability Company were filed on 10/15/2014 and assign	
(Name of the Emited Liability Company as 15 now appears on our records;)  (A Florida Limited Liability Company):  The Articles of Organization for this Limited Liability Company were filed on 10/15/2014 and assign	
(Name of the Emited Liability Company as 15 now appears on our records;)  (A Florida Limited Liability Company):  The Articles of Organization for this Limited Liability Company were filed on 10/15/2014 and assign	
The Articles of Organization for this Limited Liability Company were filed on 10/15/2014 and assign	
	ned
Florida document number L14000161092	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company hore:	;
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"	C.''
Enter new principal offices address, if applicable:	<u>المنت من من</u>
(Brincipal office address MUST BE A STIBET ADDRESS)	
S	
<b>2</b> 20	
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 address on our records, enter the name of the newer	registered.
agent and/or the new registered office address here:	
Name of New Registered Agent: ALVAREZ, NILSON	
	<del></del> }
New Registered Office Address  181 WESTMORELAND CIR  Finter Florida street address	·
KISSIMMEE Florida 34744  City Zip Code	<del></del> ;
New Registered Agent's Signature, dichanging Registered Agent:	
	مطع ماغنده د
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply	and
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	ient is
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docum	
accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docum being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability	,
accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docum	,
accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docum being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability	,

To:8506176383

If amending Authorized Person(s) authorized to manage, <u>enter the titles name; and address of each person ! being a</u> or removed from our records:					
MGR = M AMBR = A	anager uthorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	ANZOLA, KAREN	181 WESTMORELAND CIR	🖸 Add		
		KISSIMMEE, FL 34744	■Remove		
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