

7/12/2017

Division of Corporations

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Division of Corporations  
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From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.  
Account Number : 120040000167  
Phone : (305) 377-0509  
Fax Number : (305) 377-0781

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

Email Address: cmora@pbyalaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
HEROES DE VERDAD, LLC

Certificate of Status	0
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K. SALY

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HEROES DE VERDAD, 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 October 28, 2014 and assigned  
Florida document number L14000167788

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 contain 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)

283 Catalonia Avenue, Suite 200

Coral Gables, FL 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

283 Catalonia Avenue, Suite 200

Coral Gables, FL 33134

**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:

PBYA Corporate Services, LLC

New Registered Office Address:

200 S. Andrews Avenue, Suite 600

Enter Florida street address

Fort Lauderdale

City

Florida 33301

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 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

Title	Name	Address	Type of Action
MGRM	ANGEL A. RODRIGUEZ	2121 Ponce de Leon Blvd.	<input type="checkbox"/> Add
		Suite 1050	<input checked="" type="checkbox"/> Remove
		Coral Gables, FL 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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