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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GUISOI Properties LLC 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:
60012010 Perez, JR., ESq.
Gonzald Perzz, JR., P.A.
7915 COYAL Way
· Might FL 33155 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ANG GAYCIA at 305) 265 - 8228 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ S25.00 Filing Fee S25.00 Fi

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

(Name of the Limited L	Perties LLC Jability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number 14001090	lity Company were filed on 1013112014 and assi	igned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.I	L.C."
Enter new principal offices address, if applicable	ಕ ಆ <u>೧</u>	
(Principal office address MUST BE A STREET A	(DDRESS) — — — — — — — — — — — — — — — — — —	
Enter para mailing address if annihable.	- <u>p</u>	13 15 15 15 15 15 15 15 15 15 15 15 15 15
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>x</u>)	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of address here:	of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
_	, Florida	
	Est Court	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Elena Patricia	15049 SW 96 to	_Y □ Add
	Meneses Albizun De Del Solgr	Miami IFL 33194	□ Remove
			Change
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lf an effec Note: It	ve date, if other ctive date is listed, the fitted the date inserted ent's effective date	he date must be spe I in this block do	ecific and can es not meet	the applicab	date of filing or le statutory fi	more than 90 d ing requireme	_ (optional ays after filin ents, this dat	g.) Pursuant to 605	5.0207 ed as (
	ord specifies a 90th day after			e, but not a	an effective	e time, at 1	2:01 a.m	. on the earli	er of
Dated _	October	12		2016 00/1/	In 0 /	/		16 007	2, 1 22, 1 25, 2
		Vanas	ure of a snem	ber or authori	zed representat	ve of a member	<u> </u>		#13 독2

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Filing Fee: \$25.00