L14000174295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
NOV - 5 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2015

RIVER BREEZE CONDO UNIT 507, LLC
MARIA E CHIAPPY
310 NW 62 AVE.
MIAMI, FL 33126

SUBJECT: RIVER BREEZE CONDO UNIT 507, LLC
Ref. Number: L14000174295

We have received your document for RIVER BREEZE CONDO UNIT 507, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 015A00021666

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: RIVER BREEZE CONDO UNIT 507, 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:

MARIA E. CHIAPPY
Name of Person

RIVER BREEZE CONDO UNIT 507, LLC
Firm/Company

310 NW 62 AVE
Address

MIAMI FL 33126
City/State and Zip Code

mariaelenachiappy@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria E Chiappy at (786) 2618361
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the following amount:

- ■ $25.00 Filing Fee
- ☐ $30.00 Filing Fee & Certificate of Status
- ☐ $55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- ☐ $60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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TALLAHASSEE, FLORIDA

RIVER BREEZE CONDO UNIT 507, 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 November 10, 2014 and assigned Florida document number L14000174295.

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)

310 NW 62 AVE
MIAMI FL 33126

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

310 NW 62 AVE
MIAMI FL 33126

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: 310 NW 62 AVE
Enter Florida street address

MIAMI, **Florida** 33126
City *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:

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MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AR	Priscilla Bejarano	310 NW 62 AVE MIAMI FL	☐ Add
		33126	■ Remove
			☐ Change
MGR	Priscilla Bejarano	310 NW 62 AVE MIAMI FL	■ Add
		33126	☐ Remove
			☐ Change
AMBR	MARIA ELENA CHIAPPY	310 NW 62 AVE MIAMI FL	☐ Add
		33126	■ Remove
			☐ Change
MGR	MARIA ELENA CHIAPPY	310 NW 62 AVE MIAMI FL	■ Add
		33126	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated OCTOBER 1ST, 2015

Signature of a member or authorized representative of a member

MARIA ELENA CHIAPPY

Typed or printed name of signee

Filing Fee: $25.00