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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

ó'n

Account Name : JORGE L. GURIAN P.A.

Account Number : I20010000123

Phone : (305)931-0541

Fax Number : (305)931-0568

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	GROSE PROPE			
(Name of the Limited Li (A Fl	ability Company orida Limited Lie	/ as it now appears on ibility Company)	our records.)	
The Articles of Organization for this Limited Liabili Florida document number <u>L14000179274</u>	ty Company w	vere filed on NOVI	EMBER 19, 2014	and assigned
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	<u>Limited liabili</u>	ity company here:		•
The new name must be distinguishable and contain the words	*Limited Liability	y Company," the desig	nation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable	<b>:</b>			<del></del>
(Principal office address MUST BE A STREET A)	DDRESS)			
				<del></del>
Enter new mailing address, if applicable:				- -
Mailing address MAY BE A POST OFFICE BOX	2			
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered offi address here:	ice address on o	ur records, <u>enter t</u>	he name of the no
Name of New Registered Agent:	<del></del>			
New Registered Office Address:				
		Enter Florida	street address	
-			, Florida	7to Codo
		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:

MGR = Manager AMBR = Authorized Member

Title	Name	<u>Address</u>	Type of Action
MGR	REGINA MARIA CANTILLO DE ACEVEDO	1705 N. BAYSHORE DRIVE	
		UNIT 2511	
			■ Remove
		MIAMI, FL 33132	<del>-</del>
			Change
	ARTURO ACEVEDO	1705 N. BAYSHORE DRIVE	
MGR			<b>=</b> Add
		UNIT 2511	
		·	☐ Remove
		MIAMI, FL 33132	
			Change
			D Add
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			🗀 Remove
			Change

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fective date, if other than the da in effective date is listed, the date must be	specific and cannot be prior	to date of filing or more t	han 90 days after filing.) Pu	irsuant to 605.02
ote: If the date inserted in this block	does not meet the applic	able statutory filing re-	quirements, this date wil	I not be listed
cument's effective date on the Depa	riment of State's records.	•		
record specifies a delayed e	ffective date, but no	it an effective time	e. at 12:01 a.m. on	the earlier
The 90th day after the record	i is filed	ican anathra inn	-,	
The Soul day arear the resort				
annun enen 10	2018			
SEPTEMBER 19	2018			
	- Valor			
<del></del>	inature of a member or auth	orized representative of a	n member	
,	maker at a maker of a same	• •		
JORGE L. GURIAN, ESQ	AUTHORIZED REP	RESENTATIVE		
JORGE E. GOIGHI, EBG			<u> </u>	
	Typed or print	ted name of signee		

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