

L15000009948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

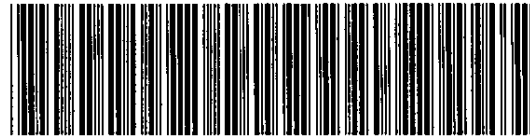
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500273047115

05/26/15--01038--004 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
15 MAY 26 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 26 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Fortune #17, 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:

Anamania Velasquez
Name of Person

Firm/Company

1000 Brickell Ave, Ste 640
Address

Miami, FL 33131
City/State and Zip Code

anamania@nexusrealty.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anamania Velasquez at (786) 2103562
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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA
MAY 26 PM 2:19

**TO
ARTICLES OF ORGANIZATION
OF**

FORTUNE 717, 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 01/16/2005 and assigned
Florida document number L1500009948.

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:

SAME ADDRESS

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME ADDRESS

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

Enter Florida street address

_____, Florida _____
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

FILED
DIVISION OF STATE
CORPORATION
PH 2:10 PM
JAN 16 2005
TALLAHASSEE, FLORIDA

or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	ANAMARIA VELASQUEZ	1000 BRICKELL AVE. STE 640	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FIMC HOLDINGS, LLC	1000 BRICKELL AVE. STE 640	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TAKADON, LLC	1000 BRICKELL AVE. STE 640	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
15 MAY 2016 PM 2:19
TALLAHASSEE, FLORIDA

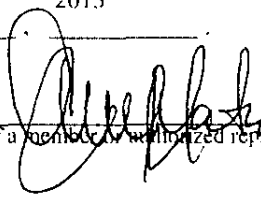
Lined area for document content.

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 May 21st 2015



Signature of a member or authorized representative of a member

Anamaria Velasquez

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION-
TALLAHASSEE, FLORIDA
15 MAY 26 PM 2:19