

# L 15000012827

JUL 10 2015 08:23 From: To: 150001659023 Page: 1 of 2

Division of Corporations Page 1 of 2

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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(((H15000165902 3)))



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To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : F & S PROJECTS CORP  
 Account Number : 120120000041  
 Phone : (954) 482-9681  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 ALBURNI LLC

Certificate of Status	0
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K. SALLY  
 EXAMINER  
 JUL 13 2015

(H15000165902 3)

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ALBURNI 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:

RAFAEL FERRER

Name of Person

F&S PROJECTS CORP

Firm/Company

1920 N COMMERCE PARKWAY, STE. 1920-3

Address

WESTON, FL. 33326

City/State and Zip Code

CONTACT@FANDSPROJECTS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAFAEL FERRER

at ( 954 ) 482.9681

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

(H15000165902 3)  
ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2015 JUL 10 AM 8:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ALBURNI 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 01/21/2015 and assigned Florida document number L15000012827

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:

12330 SW 53 STREET, SUITE 709

(Principal office address MUST BE A STREET ADDRESS)

COOPER CITY, FL. 33330

Enter new mailing address, if applicable:

12330 SW 53 STREET, SUITE 709

(Mailing address MAY BE A POST OFFICE BOX)

COOPER CITY, FL. 33330

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 603, 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

(H15000165902 3)

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<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
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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