

L150001269277

Florida Department of State
Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
C SIX, LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

MAY 28 2015
O. BRUCE

04/07/2033 04:48

#3477 P.002/004

From:jiron & company cpa, pa

305 381 5891

05/27/2015 08:12

#104 P.002/004

H15000126927

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

C SIX, 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 01/23/2015 and assigned
Florida document number L15000014277.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

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

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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>
MGR	HERNAN CERDEIRO	1915 BRICKELL AVENUE	☐ Add
		APT. C911	☒ Remove
		MIAMI, FL 33129	☐ Change
MGR	NATALIA E. YONNI	1915 BRICKELL AVENUE	☒ Add
		APT. C911	☐ Remove
		MIAMI, FL 33129	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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Dated MAY 27th 2015

Signature of provider or authorized representative of a provider

RODRIGO VARGAS

Typed or printed name of signatory

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