From: Paola Sanchez

Fax: (305) 670-1991

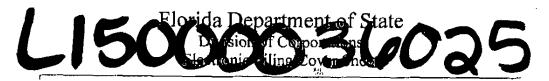
Division of Corporations

To:

Fax: (850) 617-6383

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Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

Phone

: (305),670-1991

Fax Number

: (305) 670-1993

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REGAL BEACH, LLC

Certificate of Status	0
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Help

To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REGAL BEACH, LLC		
(Name of the Limited Li (A F)	ability Company at It now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L15000036025	ty Company were filed on 02/26/2015	and assigned
This amendment is submitted to amend the following	g;	•
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 abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		<b></b>
(Principal office address MUST BE A STREET AD	DDRESS)	<del>2</del>
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		9
	•	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, <u>enter t</u> ddress here:	be name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
,	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Register	ered Agent:	

I hereby accept the appointment as registered agent und 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

From: Paola Sanchez

Fax: (305) 670-1991

To:

Fax: (850) 617-6383

Page 3 of 4 04/19/2017 3:51 PM

□ Change

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 = 3	Manager Authorized Member	elle E	·
Title	Name	Address	Type of Action
MGR	G & G MANAGEMENT US I.L.C	9130 S DADELAND BLVD	
	,	SUITE 1509	■ Remove
		MIAMI FL, 33156	Change
MGR	MARIA ANGELICA RAMPONI	9130 S DADELAND BLVD	Add
		SUITE (509	□ Remove
		MIAMI FL, 33156	Change
MGR	SUSANA BEATRIZ RAMPONI	9130 S DADELAND BLVD	
		SUITE 1509-	□ Remove
		MIAMI FL., 33156	☐ Change
<del></del>			
			[] Remove
			☐ Change
			—————————————————————————————————————
			□ Add

D. If amending any other information, enter change(s) here: (Attach additional sheets, if incressary.)  1. Effective date, if other than the date of filing:  (Optional)  (If an efficience date is increded in the block does not be price to date of filing or more than 90 days after thing.) (If an efficience date is being to block does not use the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  (The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier by The 90th day after the record is filed.  Dated  APRIL IQ  2017  Nignature of a member of signee  Page 3 of 3		Fax: (305) 670-1991	To:	Fax: (850) 617-6383	Page 4 of 4 04/19/20	17 3:51 PM
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