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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
(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:	MAIL MAIL	
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

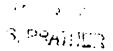
Office Use Only



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COVER LETTER

TO:

Registration Section **Division of Corporations**

> P.O. Box 6327 Tallahassee, FL 32314

SUBJECT:	CECILIA DEL MAF	RE LLC			
3065ECT	Name of Lin	nited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	spondence concerning this matter	to the following:			
		ANDRES F. MONROY			
		Name of Person MONROY & CO PA			
	3105	Firm/Company NW 107th AVENUE SUITE 5	505		
		Address DORAL, FL 33172			
	ACCO	City/State and Zip Code PUNTING@MONROYCOPA.C	СОМ		
		to be used for fiture annual report n	otification)		
For further information	concerning this matter, please c	all:			
ANDRES	F. MONROY	305 749-5555	5		
Name	e of Person		ime 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)		
Regis	LING ADDRESS: stration Section sion of Corporations	STREET/COU Registration Sec Division of Corp			

Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	EL MARE LLC		.*
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appear mited Liability Company)	s on our records.)	·:
The Articles of Organization for this Limited Liability Con-	npany were filed on	03/26/2015	and assigned
Florida document numberL15000054171			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	d liability company he	<u>re</u> :	
	EQUE LLC		
he new name must be distinguishable and contain the words "Limited	Liability Company," the de	esignation "LLC" or the a	bbreviation "L.L.C."
Inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRES			_
The par office address MOST DE A STREET ADDRES	<u></u>		
nter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
•		<u>-</u>	
	-		
3. If amending the registered agent and/or register	ed office address on	our records enter	the name of the n
egistered agent and/or the new registered office address	s here:	our records, enter	the name of the h
Name of New Registered Agent:			
	·		-
New Registered Office Address:	r. F.		
	Enter Flori	da street address	
	<u></u>	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

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>	Address	Type of Action
			Remove
			Change
			Remove
			Change
			Add
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			□ Change

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fective date, if other to the substitution of	e date must be specifi in this block does t	ic and cannot be prior to not meet the applical	o date of filing or mor ble statutory filing	(optic re than 90 days after requirements, this	filing.) Pursuant to 605,0)207 I as
record specifies a The 90th day after	delayed effective the record is file	ve date, but not led.	an effective tir	me, at 12:01 a	.m. on the earlier	r of
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ited		Sul	4 / /			
ned	Signature	of a member or author	ized representative o	f a member		

Page 3 of 3

Filing Fee: \$25.00