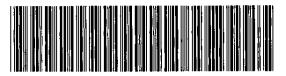
L1500064876

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL.
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		ļ

Office Use Only



700274265537

06/22/15--01023--030 **30.00

SECRETARY OF STATE FALLAHASSEE. FLORIDA

THE JUN 22 AM 8: 36

JUN 23 2015

8 MASON

COVER LETTER

TO: Registration Division of C		· · · · · · · · · · · · · · · · · · ·	<i>€</i>
Exotico	LLC		,
SUBJECT: *	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:	
	Alberto Cruces		
		Name of Person	
	Exotico LLC		
		Firm/Company	
	5000 SW 52 ST STE 501		
		Address	
	Davie, FL 33314		
	Acruces93@gmail.com	City/State and Zip Code	<u></u>
For further information	E-mail address: on concerning this matter, please of	to be used for future annual report noti	fication)
Alberto Cruces		929 249-2721	
Nam	e of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check fo	r the following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Second Filing Fee, Certificate of Status & SECRETARY Certified Copy 5 concluded (additional appris concluded) AHASSE
Regi Divi P.O.	istration Section sion of Corporations Box 6327 ahassee, FL 32314	STREET/COURI Registration Section Division of Corporal Clifton Building 2661 Executive Ce Tallahassee, FL 32	on STATE ORATIONS STATE STATE STATE onter Circle

TO ARTICLES OF ORGANIZATION OF

Exotico LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears on our record Liability Company)	<u>s.</u>)		
The Articles of Organization for this Limited Liability Company L15000064876 Locida document number	were filed on	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	5000 SW 52 ST STE 501			
(Principal office address MUST BE A STREET ADDRESS)	Davie, FL 33314			
Enter new mailing address, if applicable:	5000 SW 52 ST STE 501			
Mailing address MAY BE A POST OFFICE BOX)	Davie, FL 33314			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		s, enter the name of the ne		
New Registered Office Address:				
Nogistered office Address.	Enter Florida street addres	S		
		orida		
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605,	nd I am familiar with and F.S. Or if this document is		

or removed from our records:

MGR =	Manager	-1
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Add
			☐ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			Add
			Remove VISION OF COME 14 SECRETAR SECRE
			ILEU RY OF STATE CORPORATIONS 2 AM 8:536 2 AM 8:536 SEE, FLORIDA SEE, FLORIDA
			Change

					_
	· · · · · · · · · · · · · · · · · · ·				
	.		<u> </u>		
					_
		-			
					<u>. </u>
					_
					
					
					
		-			_
ffective date, if other than the an effective date is listed, the date must lote: If the date inserted in this blo ocument's effective date on the De	t be specific and cannot be pric ock does not meet the appli	or to date of filing or more that icable statutory filing requi	(optional) n 90 days after filing. irements, this date) Pursuant to will not be	605.0207 listed as
	parament of blace 5 feedld:	J.			
seament 3 circuive date on the De					
e record specifies a delayed		ot an effective time,	at 12:01 a.m.	on the ea	
e record specifies a delayed The 90th day after the reco		ot an effective time,	at 12:01 a.m.		rlier of
e record specifies a delayed The 90th day after the reco	ord is filed.	ot an effective time, 	, E.	15 JUN SECRE	SZ€
e record specifies a delayed The 90th day after the reco	2015	<u></u> .	SCINCING	15 JUN 22 SECRETARY	SZ€
e record specifies a delayed The 90th day after the reco	ord is filed.	<u></u> .	S S S S S S S S S S S S S S S S S S S	15 JUN SECRE	SZ€

Page 3 of 3

Filing Fee: \$25.00