PAGE 01/04

Page 1 of 2

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H15000210263 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

: MARCELL FELIPE, P.A. Account Name

Account Number : 120110000064 Phone : (305)381-8500 Fax Number : (305)381-6225

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

Email Address: Munnz & marcellfe : pe

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VICON INFRASTRUCTURES & SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Li		
(AF)	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili Florida document number L15000065101	ty Company were filed on 04/14/2015	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	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET AI</u>	ODRESS)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>	2	
B. If amending the registered agent and/or registered agent and/or the new registered office a	egistered office address on our records, e address here:	enter the name of the r
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street address	
· 	, Floric	
	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

Title	Name	Address	Type of Action
MGR	CACHALDORA, MARIA A	3400 SW 27TH AVENUE	
		SUITE 1404	■ Remove
		MIAMI, FL 33133	Change
MGR	CUADRADO, ROBERTO	2127 BRICKELL AVENUE	
		SUITE 902	■ Remove
		MIAMI, FL 33129	□ Change
MGR	GARZON, CARLOS	90 SW 3 STREET	
<u> </u>		UNIT 300B	■ Remove
		MIAML FL 33130	☐ Change
MGR	H N H HOLDING GROUP LLC	848 BRICKELL AVE	
MGR		4TH FLOOR	□ Remove
		MIAMI, FL 33131	☐ Change
			□ Remove
			Change
			□ Remove
			Change

If amo	ending any other info	rmation, enter	r change(s) he	re: (Attach ad	ditional sheets, i	f necessary.)	
-	<u> </u>					······	
•	·····		_ _				
-		· — — · · · · · · · · · · · · · · · · ·					
-	<u> </u>						
_							
-							
							_ _
*	·						
							
-							
-							_ _
-							
-							
Effect (If an eff Note: docum	tive date, if other that ffective date is listed, the dat If the date inserted in the nent's effective date on t	the date of file must be specific is block does no he Department o	ling: and cannot be price of meet the appliof State's record	or to date of filing icable statutory s.	or more than 90 day filing requirement	(optional) s after filing.) Pursuant t is, this date will not b	to 605.0207 (3 e listed as th
the red	cord specifies a del e 90th day after the	eyed effective record is file	e date, but n :d.	ot an effectiv	e time, at 12	:01 a.m. on the e	arlier of:
Dated	August 31		2015	·			
	John 1	valter	E Wardhan on and	horized represent	office of a mambas		 -
	U	Signature of	Tanicmost of Sur	morreer represent	tive of a member		
	John Walter						

Page 3 of 3

Filing Fee: \$25.00