LISUUUMAH

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	. WAIT	MAIL
(Bi	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of S	tatus
Special Instructions to	Filing Officer:	
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Office Use Only



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2015 JUN 30 F 2: 03

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COVER LETTER

TO:	Registration Sec Division of Corp				
our ir		VILLA DI	UARTE, LLC		
SUBJE	XI:	Name of Lim	ited Liability Company		
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspoi	ndence concerning this matter	to the following:		
			VILLALOBOS, ALI J.		
			Name of Person		
			Firm/Company		
			Address		
			MIAMI, FL 33122		
			City/State and Zip Code	77 SI	
			to be used for future annual report notifies	ation)	7
For fur	ther information co	oncerning this matter, please c	all:	2015 JUN 30 SECRETARY ALLAHASSE	
_	Ali Vill	alobos	561 701-1730	ס פּהַי	
	Name of	f Person	Area Code Daytime T	elephone Number 2	
Enclos	ed is a check for th	e following amount:			
\$2	5.00 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)	

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

, LLC				
it now appears on y Company)	our records.)			
filed on	04/15/2015	and assigned		
ompany here:				
LLC				
mpany," the design	nation "LLC" or the ab	breviation "L.L.C."		
34	80 NW 85th COURT	Γ		
: 3480 NW 85th COOK1 DDRESS) MIAMI, FL 33122				
	MIAMI, FL 33 P2			
address on ou	r records, enter	the wame of the ne		
Enter Florida s	street address			
	Florida			
City	, F 101 IGA	Zip Code		
	it now appears on ty Company) filed on company here: LLC impany," the design 34	it now appears on our records.) ty Company) filed on		

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
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an effective	ate, if other than the da date is listed, the date must be	specific and can	not be prior to	date of filing or	more than 90 d	_ (optiona ays after fili	ng.) Pursi	uant to 605.
	date inserted in this block effective date on the Depa			le statutory fil	ing requireme	nts, this da	te will n	ot be liste
	specifies a delayed e n day after the record		e, but not a	an effective	time, at 1	2:01 a.m	. on th	ne earlie
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ated	JUNE 12th		2015	.•				
			1/20	MAD.				
_	Sig	nature of a mem	ber of authori	zed representati	ve of a member			
	-		1/	-				

Page 3 of 3

Filing Fee: \$25.00