(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
:		:
		i

Office Use Only



000278291260

10/22/15--01023--015 **30.00

SECRETARY OF STATE

OCT 2 3 2015 S. YOUNG

COVER LETTER

	egistration Se ivision of Cor					
CHDIECT		manager and report the EIN				
SUBJECT	; <u></u>	Name of Lim	nited Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please retui	rn all correspo	ndence concerning this matter	to the following:			
		Ciro Trombetta				
		***************************************	Name of Person		-	
		Limina Holdings, LLC				
			Firm/Company			
		1450 NW 107 AV			SECRET ALLAND	•===
			Address			
		Doral, Florida 33172			22 PM ARY OF S ASSEFUL	
			City/State and Zip Code		GIS W	
		happyfiestausa@gmail.com				
For further	information co	e-man address: (to be used for future annual report notificall:	:auon)	, · · · · · · · · · · · · · · · · · · ·	
Ciro Tromi	betta		407 8444731			
	Name of	f Person	at () Area Code Daytime	Telephone Number	•	
Enclosed is	a check for th	ne following amount:				
□ \$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

MAILING ADDRESS:

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

LIMINA HOLDINGS, LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records imited Liability Company)	
he Articles of Organization for this Limited Liability Cor	npany were filed on 04/21/2015	and assigned
lorida document number L15000069290		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limite	ed liability company here:	
he new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>	<u> </u>
		STEE 22
nter new mailing address, if applicable:		물등 로 다
Mailing address MAY BE A POST OFFICE BOX)		95 49
		20 DA
3. If amending the registered agent and/or registered agent and/or the new registered office address		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida Zip Code
	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
MGR	Ciro Trombetta	10750 NW 66 ST #410	= Add
		Doral, FL. 33178	□ Remove
			□ Add
			□ Remove
			□ Change
			SECONDINA PROVE
			Change 2
		· ·	□ Remove
			Change
		□ Remove	
		Change	
		Add	
		· · · · · · · · · · · · · · · · · · ·	☐ Remove
			Change

	_
	المستعدد الم
	- C
	<u>*</u> 8 - 1
	7 2 T
	- <u>888 8 m</u>
	3. 2. IIIORIII
ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date	of filing or more than 90 days after filing.) Pursuant to 605.020
te: If the date inserted in this block does not meet the applicable sta	atutory filing requirements, this date will not be listed as
nument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an e	ffective time, at 12:01 a.m. on the earlier o
he 90th day after the record is filed.	
, 10/19/2015	
red 10/19/2013	<u></u>
	7)

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

000338.606227.113956.26259 1 AB 0.416 530 _[11111]_{}1.[1₁1][11₁1][11₁₁1][1₁₁₁][₁₁₁₁][1₁₁₁][1₁

LIMINA HOLDINGS LLC FILIPPO OCCHINO MBR 1450 NW 107 AVE DORAL FL 33172

Date of this notice: 10-16-2015

Employer Identification Number: 38-3980639

Form: SS-4

Number of this notice: CP 575 B

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 38-3980639. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information account, or even cause you to be assigned more than the information of the correct information and complete the characteristics. is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2016

If you have questions about the form(s) or the due dates(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. and its instructions for additional information.

00338

M