

L15000084810

(Requestor's Name)

(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:

Office Use Only



900276071769

08/19/15--01027--006 \*\*25.00

FILED  
15 AUG 19 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 20 2015  
T. HAMPTON

**IPANEMA OF FLORIDA, LLC**  
**3341 NW 65 STREET, MIAMI, FL. 33147**  
**PHONE 305-326-9304 FAX 305-324-9873**

---

Thursday, August 13, 2015

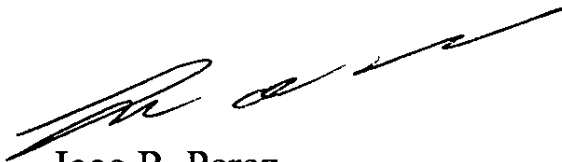
To: Florida Department of state  
Division of Corporations

Dear Sir/Madam:

We are enclosing an amendment to the Articles of incorporation of Ipanema of Florida, LLC.

You can reach us at 305-326-9304 or by mail at 3341 NW 65<sup>th</sup> St.  
Miami, Fl. 33147

Sincerely

A handwritten signature in black ink, appearing to read 'Joao R. Perez', with a long horizontal flourish extending to the right.

Joao R. Perez  
Manager.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: IPANEMA OF FLORIDA, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOAO R. PEREZ

Name of Person

IPANEMA OF FLORIDA, LLC

Firm/Company

3341 NW 65TH ST

Address

MIAMI, FL. 33147

City/State and Zip Code

RSANCHEZ@JRPGROUPINVEST.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD SANCHEZ

305 326-9304  
at ( )

Name of Person

Area Code

Daytime 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)

**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**

IPANEMA OF FLORIDA, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 13, 2015 and assigned  
Florida document number L15000084810.

This amendment is submitted to amend the following:

**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 the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED  
15 AUG 19 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	JAYME R PEREZ	3341 NW 65TH ST	<input type="checkbox"/> Add
		MIAMI, FL. 33147	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GABRIEL REVAH	20408 NE 15TH CT	<input checked="" type="checkbox"/> Add
		MIAMI, FL. 33178	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
15 AUG 19 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 13, 2015

Signature of a member or authorized representative of a member

JOAO R PEREZ

Typed or printed name of signee

**Filing Fee: \$25.00**

FILED  
15 AUG 19 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA