

L15000086480

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : JORGE GAVIRIA
Account Number : 12000000245
Phone : (305) 666-8544
Fax Number : (305) 675-7737

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

Email Address: JORGE @ GAVIRIALEGAL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
IDIMSA MYSTIC POINTE LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

FILED
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TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN

AUG 03 2017

H 170002026373

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IDMISA MYSTIC POINTE, 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 15, 2015 and assigned
Florida document number L15000086480.

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)

600 S. DIXIE HWY., SUITE 527

WEST PALM BEACH, FLORIDA 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

600 S. DIXIE HWY., SUITE 527

WEST PALM BEACH, FLORIDA 33401

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:

JORGE GAVIRIA, ESQ.

New Registered Office Address:

1395 BRICKELL AVE. SUITE 800

Enter Florida street address

MIAMI

City

Florida 33131

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

Page 1 of 3

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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	IDIMSA LLC	175 SW 7TH ST.,	☐ Add
		SUITE 2112, MIAMI, FL. 33130	☒ Remove
			☐ Change
MGR	MAURICIO BOTERO	600 S. DIXIE HWY. NO. 527	☒ Add
		WEST PALM BEACH, FL. 33401	☐ Remove
			☐ Change
MGR	ADRIANA ESCOBAR	600 S. DIXIE HWY. NO. 527	☒ Add
		WEST PALM BEACH, FL. 33401	☐ Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: AUGUST 2, 2017 (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an 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 605.0207 (3)(b)

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.

(b) The 90th day after the record is filed.

Dated August 2,

Signature of a member or authorized representative of a member

Lorge Gaviria

Typed or printed name of signee

Page 3 of 3

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