## L150000 869 17

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000273086670

05/26/15--01031--019 \*\*25.00

SECRETARY OF STAFE

n a tar palangan pala

HAY 29 2015 J. HARRIE

## **COVER LETTER**

TO: Registratio Division of	n Section ' Corporations		
	CO USA LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Article	s of Amendment and fee(s) are subn	nitted for filing.	
Please return all corr	respondence concerning this matter to	o the following:	
	SEVERINE GIANESE-PIT	TMAN	
		Name of Person	
	GIANESE-PITTMAN P.A.		
		Firm/Company	
	100 N BISCAYNE BLVD,	SUITE 3070	
		Address	
	MIAMI, FL 33132		
		City/State and Zip Code	
	sgianese@sgpittman.com		· · · · · · · · · · · · · · · · · · ·
	E-mail address: (to	be used for future annual report notif	ication)
For further informati	on concerning this matter, please cal	II:	
SEVERINE GIANE	SE-PITTMAN	786 5476919	
Na	ame of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check	for the following amount:		
\$25.00 Filing Fe	ce \$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

(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records Liability Company)	.)
The Articles of Organization for this Limited Liability Company Florida document number L15000086917	were filed on 05/15/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	100 N BISCAYNE BLVD	2015 TALE
(Principal office address MUST BE A STREET ADDRESS)	SUITE 3070	
	MIAMI, FL 33132 UN	THE P
Enter new mailing address, if applicable:	100 N BISCAYNE BLVD	SSEELF
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 3070	100 H:
	MIAMI, FL 33132 UN	5, 2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:		
	, Florida	
<del></del>	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	,	
I hereby accept the appointment as registered agent and agr		ther agree to comply with th d I am familiar with and

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BAILLY, ANGELINE	100 N BISCAYNE BLVD	
		SUITE 3070	☐ Remove
		MIAMI, FL 33132 UN	Change
MGR	BAILLY, ANGéLINE	100 N BISCAYNE BLVD	□ Add
	-	SUITE 3070	
		MAIMI, FL 33132 UN	□ Change
			Add
			□ Remove
			Change
· 18			Add
			□ Remove
			☐ Change
			Add Add 2015 prove Reny 26 AH 1dd 32
			☐ Remove
			□ Change

. If amending	g any other information, enter o	change(s) here: (Attach additional sheets, if	necessary.)
	1		
		· · · · · · · · · · · · · · · · · · ·	
			<del></del>
		- 189911 - 1	
			<del></del>
			<del></del>
	1.2.2.2.2.2.		
Note: If the document's	date inserted in this block does not effective date on the Department of	nd cannot be prior to date of filing or more than 90 days meet the applicable statutory filing requirements	s, this date will not be listed as the
	day after the record is filed		
Dated MAY	20	2015	
_	Simplify of	Accept Bucev	70 ZO
S	SIGNATURE OF SEVERINE GIANESE-PITTMAN	a member of authorized representative of a member	15 MAY ECRETA
		Typed or printed name of signee	26 AN RY OF SSEE.
		Page 3 of 3	ST. F.
		Filing Fee: \$25.00	<u> </u>