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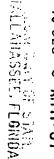
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## **COVER LETTER**

TO:		istration Section of Corporation of Corporation				
CTID III	or.					
SUBJEC	.1:		<del></del>	ited Liability Company		
The encl	osed	Articles of An	nendment and fee(s) are sub-	mitted for filing.		
Please re	eturn	all corresponde	ence concerning this matter	to the following:		
			carlosgil			
				Name of Person		_
				Firm/Company		<del></del>
			3910westflaglerstreet			_
			Address			
			miami, florida 33134			
			City/State and Zip Code			
			-			
		•	E-mail address: (t	o be used for future annual i	report notification)	
For furth	ner in	formation cond	eerning this matter, please ca	ill:		
carlosg	il 			305 44: at ()	3-2525	
		Name of Pe	erson	Area Code	Daytime Telephone Numb	er
Enclosed	d is a	check for the f	ollowing amount:			
□ \$25.	00 F	iling Fee	□ \$30.00 Fiting Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enco	Certific losed) Certific	Filing Fee, cate of Status & cd Copy al copy is enclosed)
The enclosed Articles of Amendment and fee(s) are submit Please return all correspondence concerning this matter to carlosgil  3910westflagler street  miami, florida 33134  carlos@carlosagilpa.com.c  E-mail address: (to carlosgil)  Name of Person  Enclosed is a check for the following amount:  \$\textstyle \text{\$\text{25.00}\$ Filing Fee } \$\text{\$\tex						

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

PARADISE 85, LLC		•
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
lorida document number		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company." the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	8370 SW2 STREET	
Principal office address MUST BE A STREET ADDRESS)	MIAMI FLORIDA 33144	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	8370 SW2 STREET MIAMI FLORIDA 33134	
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:		the name of the
	Enter Florida street address , Florida	
	City	Zip Code

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.

New Registered Agent's Signature, if changing Registered Agent:

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>	Type of Action
MGR	MARK A BULLOCK	215 S. STATE STREET, SUITE 38	
		SALT LAKE CITY, UT 84111	■ Remove
			☐ Change
MGR	IGNACIO SOTOLONGO	8370 SW 2 STREET	<b>≅</b> Add
		MIAMI FLORIDA 33144	Remove
			☐ Change
			Remove
			Change S  D  Artel
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tive date, if other than the date of filing:	( <b>optional</b> ) days after filing.) Pursua	ant to 605.
If the date inserted in this block does not meet the applicable statutory filing requiren		
ment's effective date on the Department of State's records.		
provid anacifica a delayed affective data, but not an affective time, at	13.01 a.m. on th	o on-lic
ecord specifies a delayed effective date, but not an effective time, at e 90th day after the record is filed.	12:01 a.m. on m	e earne
December 1st 2015		
December 1 <sup>ST</sup> 2015		
Signature of a member or authorized representative of a memb	xer	

Page 3 of 3

Filing Fee: \$25.00