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ICONBAY 3205 LLC				
SUBJE	LI:			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		JOSE LEGGIO		
			Name of Person	
		ICONBAY 3205 LLC		
			Firm/Company	
		460 NE 28TH ST APT 320	05	
			Address	
		MIAMI FL 33137		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For furt	her information c	oncerning this matter, please c	all:	
SERGI	D DE VARONA	CPA	305 448-9899 at ()	
<u> </u>	Name o	f Person		ne Telephone Number
Enclose	d is a check for th	e 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/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 32	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ICONBAY 32051,LC

(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 <u>JULY 22ND 2015</u> and assigned Florida document number <u>L15000125442</u>

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 "LLC."

Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	la y μα ματό του πατοποιείο και της της της της του το ποιοιοποιο αποτεστορογια το μοτοποιοποίο στο που στο σ Το το	<u></u> ;,	ð	·.
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		ESS Est	23	с. н. н. 1,714 н. н.
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		- U 0	10	<u> </u>
		222	1555	

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:	SERGIO DE VARONA CPA	ана ан о англика какала какала какала какала какала какала какала какала какала такала какала какала какала ка	
New Registered Office Address:	2525 PONCE DE LEON BLVD STE 300		
	Enter Flo	rida street address	
	CORAL GABLES	, Florida ³³¹³⁴	
	 (Ciți	Zip Cale	

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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

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MGR = Manager AMBR = Authorized Member

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Title	Name	Address	Type of Action
MGR	RAFAEL ESPINOZA	460 NE 28TH ST APT 3205	🗆 Add
		MIAMI FL 33137	
•			Change
MGR	JOSE LEGGIO	460 NE 28TH ST APT 3205	🗖 Add
		MIAMI FL 33137	Remove
			Change
			DIV 🗆
			Remove
Management state. An external state	-		Change Contraction of the second seco
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			🗖 Add
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			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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			ALLAHUSSEE, FLORIDA	3 111 2 24

E. Effective date, if other than the date of filing: OCTOBER 1ST 2016 (If an effective date is lived, the tax (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.

If the record specifics a delayed offective date, but not an effective time, at 12-D1 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 09/29 Zo16	
M_1 (
Signiture of a member or authorized representative of a member	$\mathcal{O}_{\mathcal{U}}$ -
Protael Courson Espinoza	Mala

Page 3 of 3

Filing Fee: \$25.00