

L15000152074  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H18000314344 3)))



H18000314344ABC

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

From: Account Name : RAUL VALDES-FAULI, P.A.  
Account Number : I20180000021  
Phone : (786)870-5083  
Fax Number : (786)907-4006

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

Email Address: VLAGANA@RVF-LAW.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
JORGE SOLERGIBERT, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2018 OCT 31 PM 12:45

FAX AUDIT #H18000314344 3

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JORGE SOLERGIBERT, L.L.C.  
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:

VANESSA LAGANA, PARALEGAL  
Name of Person  
RAUL VALDES-FAULI, P.A.  
Firm/Company  
355 ALHAMBRA CIRCLE, SUITE 1205  
Address  
CORAL GABLES, FL 33134  
City/State and Zip Code  
vlagana@rvf-law.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA LAGANA  
Name of Person at (786) 870-5083  
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

FAX AUDIT #H18000314344 3

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FAX AUDIT #H18000314344 3

JORGE SOLER GIBERT, L.L.C.

(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 09/04/2015 and assigned  
Florida document number L15000152074

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OCT 31 AM 8:21

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 "L.L.C." 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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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



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If attending 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	LORENA SIBAJA	C. BRISAS DEL BOSQUE. TOYCOS 100M E 800M S	<input checked="" type="checkbox"/> Add
		600M E. CASA #4	<input type="checkbox"/> Remove
		ESCAZU, SJ 00000 CR	<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

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FAX AUDIT #H18000314344 3

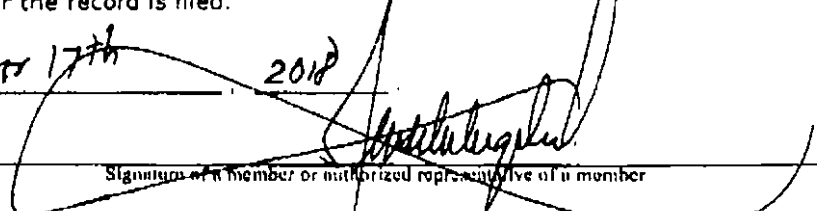
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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OCT 31 AM 8:24

E. 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated October 17th 2018  
  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
JORGE SOLER-CIBERT, MANAGER  
\_\_\_\_\_  
Typed or printed name of signer