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ALLAMASSEE FRANCIA

DEC 08 2015 S. YOUNG

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: 601DEN SHORES ESTATE UC 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:
YANINA MICULITZKI, ESq. Name of Person
YANINA MICULITZKI P. A Firm/Company
20801 BISCAYNE BIVE #306 Address
Aventura Floring State and Zip Code  VANIMA MICULITERIA LAW. WAS TO Service and Sip Code  For further information concerning this matter, please call:
6-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \ \ \text{(additional copy is enclosed)} \ \ \text{(additional copy is enclosed)} \ \ext{(additional copy is enclosed)} \ \ \text{(additional copy is enclosed)} \ \ext{(additional copy is enclosed)} \ \ \text{(additional copy is enclosed)} \ \ext{(additional copy is enclosed)} \ \ext{(additional copy is enclosed)} \ \ \text{(additional copy is enclosed)} \

#### MAILING ADDRESS:

TO:

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

## TO ARTICLES OF ORGANIZATION OF

(Name of the Limited (A	SHOVES ESTATE UC Liability Company as it now appears on our records.) Florida Limited Liability Company)
	• • • • • • • • • • • • • • • • • • •
This amendment is submitted to amend the follow	ing:
A. If amending name, enter the new name of th	Articles of Organization for this Limited Liability Company were filed on 9 10 15 and assigned da document number 15 000 15 4 5 40 amendment is submitted to amend the following:  Tamending name, enter the new name of the limited liability company here:  Even name must be distinguishable and contain the words "Limited Liability Company," the designation "L1.C" or the abbreviation "L1.C."  The new principal offices address, if applicable:  Cipal office address MUST BE A STREET ADDRESS)  The new mailing address, if applicable:
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	X) ACC 5
registered agent and/or the new registered office	registered office address on our records, enter-the name of the new e address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
-	, Florida
	Cuy 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

# or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ezepviel barredes	19950 w country club of #	<u>f</u> □ Add
		Nentura, FI 33180	CRemove
			Change
MGR	Golden Shores mana	georent, LLC	<b>j×</b> Add
		19950 W. COUNTY CLUB dr #	1903□ Remove
		Abentura FL 33180	Change
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Effective fan effect	e date, if other than the date of filing:	(optional) ore than 90 days after filing.) Pu	rsuant to 605.020
Note: If	the date inserted in this block does not meet the applicable statutory filing	g requirements, this date wil	l not be listed as
Jocumeni	t's effective date on the Department of State's records.		
ne recor	rd specifies a delayed effective date, but not an effective t	ime at 12:01 a.m. on	the earlier o
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	NOV 30 , 9015.		
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Dated	Signature of a member or authorized representative  Yaning Miculation &  Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00