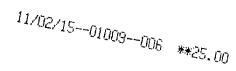
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SECRETARY OF STATE
AND MASSEF FLORID

NOV -2 PH 2: 47

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· COVER LETTER

то:	Registration Sec Division of Corp				
CUDIC		NANCE 2932 LLC			
SUBJE	CI:	Name of Limit	ed Liability Company		
The enc	losed Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please re	eturn all correspon	dence concerning this matter to	the following:		
		E. BEATRIZ BROUWER			
			Name of Person		
		BRIELE & ECHEVERRIA	PA		
			Firm/Company		
		5001 SW 74TH COURT ST	E 202		
			Address		
		MIAMI, FL 33155			
			City/State and Zip Code		
		BBROUWER@BECPAS.NE	ET be used for future annual re		
F 6 1				eport notification)	
ror turth	er information con	cerning this matter, please cal	1:		
E. BEAT	TRIZ BROUWER		305 443- at ()	-5768	
	Name of F	Person	Area Code	Daytime Telephon	e Number
Enclosed	is a check for the	following amount:			
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed)	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

CAJIGAL FINANCE 2932 LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
	cles of Organization for this Limited Liability Company were filed on 10/8/2015	
Florida document number L15000172131		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		70 CS must
		50 5
Patan nam mailine adduses if amilia blac		SS 2
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		⊕ N
		35. 7
 If amending the registered agent and/or registered of registered agent and/or the new registered office address here 		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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

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>	Address	Type of Action
MGR	CAJIGAL FINANCE LIMITED	17122 SW 92 STREET	□ Add
		MIAMI, FL 33196	■ Remove
			Change
MGR	ELZIDA M. MONTILLA	17122 SW 92 STREET	= Add
		MIAMI, FL 33196	Remove
			☐ Change
MGR	VICENTE R. MONTILLA	17122 SW 92 STREET	Add
		MIAMI, FL 33196	☐ Remove
		-	□ Change
			□ Add
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			Remove
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			Add
			□ Remove
			Change

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te: If the date inserted in	an the date of filing: date must be specific and cannot this block does not meet to the Department of State's	ot be prior to date of filing or n he applicable statutory filin s records.	(optional) nore than 90 days after filing. ag requirements, this date) Pursuant to 605.0207 will not be listed as
record specifies a de he 90th day after th	elayed effective date, ne record is filed.	but not an effective	time, at 12:01 a.m. (on the earlier of
	, 20	15		2015 SEC
ed OCTOBER 22	/		\	59 <u>*</u>
ed OCTOBER 22	Marchin m	Tour Alex 9		- Em (三)
ed OCTOBER 22	Signature de a memo	our expresentative	of a member	NOV -2
led		er of authorized representative	of a member	

Page 3 of 3

Filing Fee: \$25.00