LI5000 178884

(Red	questor's Name)	
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PICK-UP	WAIT	MAIL
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JUN 1 5 2020 S. YOUNG

COVER LETTER

Registration Section Division of Corporations

TO:

INMOBIL SUBJECT:	IARIA SAN ARMANDO USA	LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JUAN PABLO O'RYAN		
		Name of Person	
	INMOBILIARIA SAN AI	RMANDO USA LLC	
		Firm/Company	
	2400 CROWNPOINT EX	ECUTIVE DR. STE 300	
		Address	
	CHARLOTTE, NC 28227		
		City/State and Zip Code	
	TALY@SPICET.COM		
		to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
TALY BRINZEY		980 253-5661 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he 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 S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INMOBILIARIA SAN ARMANDO USA L	LC	· : · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liabil	ity Company as it now appears on our record a Limited Liability Company)	(5.) - II - III
(A Florid	a Limited Liability Company)	47.14 <
	- 10/21/2015	The North
The Articles of Organization for this Limited Liability (Company were filed on 10/21/2013	and assigned as
Florida document number 1.15000178884		
	 -	÷ 5 5
This amendment is submitted to amend the following:		ŧ.
_		S
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	Struct Link May Community and the structure of the	** - Ab
The new hame must be distinguishable and contain me words. This	med Diability Company, the designation "DEC	or the appreviation "L.E.C.
Enter new principal offices address, if applicable:		
•	n.c.c.	
(Principal office address MUST BE A STREET ADDI	(E33)	
Park III III III II		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
13. 16. II. II. II. II. II. II. II. II. II. I		
B. If amending the registered agent and/or registere	d office address on our records, <u>enter</u>	the name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	is.
		orida
	City	Zip Code
New Registered Agent's Signature, if changing Registere	Adent	

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

authorized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>1 itie</u>	Name	Address	Type of Action
AMBR	SONIA ANDREA VARAS	2400 CROWNPOINT EXECUTIVE DR, STE 300	≡ Add
		CHARLOTTE, NC 28227	□Remove
			□Change
MGR	JUAN ESTEBAN OʻRYAN	2400 CROWNPOINT EXECUTIVE DR. STE 300	= Add
		CHARLOTTE, NC 28227	
			□Remove
			□Change
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Taatiya data if a	than than the data - S.C.			4 •	
in effective date is lis	ther than the date of fi sted, the date must be specific serted in this block does no e date on the Department of	от теет те аррисарк	ate of filing or more that e statutory filing requ	(optional) in 90 days after filing tirements, this date)) Pursuant to 605,020 : will not be listed a
ne. If the date his					
cument's effective	delayed effective date, but	not an effective time,	at 12:01 a.m. on the	earlier of: (b) T	ne 90th day after the
ocument's effective	delayed effective date, but	not an effective time,	at 12:01 a.m. on the	earlier of: (b) T	ne 90th day after the
record specifies a d is filed. MARCH 27	ital	2020			ne 90th day after the
record specifies a d is filed. MARCH 27	ital				ne 90th day after the

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