

L16000005752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800288266368

07/26/16--01039--017 **25.00

FILED
16 JUL 26 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

belmar

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FRANCO & PINO, LLC

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:

PEDRO P. SAEZ

Name of Person

SAEZ & ASSOCIATES

Firm/Company

777 BRICKELL AVENUE, SUITE 1110

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

PSAEZ@SAEZLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAITE MENDOZA

305 358-0028
at ()

Name of Person

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

FILED
16 JUL 26 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FRANCO & PINO, LLC

(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 JANUARY 7, 2016 and assigned Florida document number L16000005752.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

777 BRICKELL AVENUE

SUITE 1110

MIAMI, FLORIDA 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

777 BRICKELL AVENUE

SUITE 1110

MIAMI, FLORIDA 33131

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:

PEDRO P. SAEZ

New Registered Office Address:

777 BRICKELL AVENUE, SUITE 1110

Enter Florida street address

MIAMI

, Florida 33131

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>	<u>Address</u>	<u>Type of Action</u>
MGR	GIUSEPPE FORMICA	133 NE 2nd AVENUE	<input type="checkbox"/> Add
		SUITE 3101	<input type="checkbox"/> Remove
		MIAMI, FLORIDA 33132	<input checked="" type="checkbox"/> Change
MGR	FRANCESCO FERRAZZANO	777 BRICKELL AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 1110	<input type="checkbox"/> Remove
		MIAMI, FLORIDA 33131	<input type="checkbox"/> Change
MGR	GIUSEPPE SPADACCINI	777 BRICKELL AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 1110	<input type="checkbox"/> Remove
		MIAMI, FLORIDA 33131	<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

FILED
 16 JUL 6 8 26
 ST. JAMES
 MIAMI, FLORIDA

10 JUL 26 AM 8:2
STO. LOUIS MO. T.
TALLAHASSEE, FLORIDA

FILED
18 JUL 26 AM 8:24
ST. LOUIS, MO
TALAMON, EDWARD

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.

Dated JULY 22, 2016

Signature of a member or authorized representative of a member

GIUSEPPE SPADACCINI

Typed or printed name of signee