# L16000005981

(Re	equestor's Name)
(Ad	dress)
(Ad	dress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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SECRETARY OF STATE
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# **COVER LETTER**

TO:	Registration So Division of Co			
CUDI	POT.	ACR4	SALE LLC	
SUBJ	ECI:	Name of Lim	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			JORGE COSIO	
			Name of Person	<del></del>
			ACR4SALE LLC	
			Firm/Company	
			7900 NW 68TH STREET	
			Address	<del></del>
			MIAMI, FL 33166	
			City/State and Zip Code	
			GE04242000@YAHOO.COM	
			to be used for future annual report notifi	cation)
For fur	ther information c	oncerning this matter, please ca	all:	
JORGE COSIO		COSIO	305 471-7600 at (	
	Name o	f Person	at ()Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>≌</b> \$2.	5.00 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

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

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2017	IAR IC		
TALLAH D	ARY O ASSEE	PM 307 DF STATE FLORIDA	•
•	••	LORIDA	

ACR4SALE LLC (Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company) \_\_\_\_ and assigned Florida document number \_\_L16000005981 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 "LLC." 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: GUSTAVO A. BRAVO, ESQ. Name of New Registered Agent: 2 S. UNIVERSITY DRIVE, SUITE 304 New Registered Office Address: Enter Florida street address **PLANTATION** 

### 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	JORGE COSIO	7900 NW 68TH STREET	Add
		MIAMI, FL 33166	□ Remove
			☐ Change
MGR	ANIL GOWDA	1295 CAMELLIA CIRCLE	Add
		WESTON, FL 33326	■ Remove
			□ Change
<del></del>			Add
			Remove
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an effectiv l <b>ote:</b> If t	date, if other than the we date is listed, the date must be date inserted in this blue seffective date on the D	t be specific and ock does not r	d cannot be pri- neet the appl	icable statuto	ing or more than ry filing requi	(optio 90 days after f rements, this	iling.) Pursuan	t to 605.0207 be listed as
e record The 90	d specifies a delayed th day after the rec	l effective ord is filed.	date, but r	ot an effe	ctive time, a	at 12:01 a.	.m. on the	earlier of
	MARCH 10		2017	دست				
ated			<del></del>	719				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00