116000027936

(Re	equestor's Name)	
(Ad	ddress)	····
(Ac	ddress)	
(Cit	ty/State/Zip/Phone #	r)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
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03/28/16--01015--008 **25.00

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COVER LETTER

TO:

	legistration Sec Division of Corp			
		TROPICAL LLC		
SUBJECT	l:	Name of Limi	ted Liability Company	<u></u>
		Amendment and fee(s) are subr	_	
Please reti	urn all correspor	idence concerning this matter t	to the following:	
		JESUS BARRERA-PERA	LES	
			Name of Person	
			Firm/Company	
		21551 SW 280 STREET	i mireompany	
		21031 311 200 311(02)	Address	<u> </u>
		HOMESTEAD FL 33031		
			City/State and Zip Code	
		jennyaguilar05@yahoo.com		
		E-mail address: (1	to be used for future annual report no	ification)
For furthe	er information co	oncerning this matter, please ca	all:	
JESUS B	ARRERA-PER	ALES	305 323-4146 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 sssee, FL 32314	STREET/COUF Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ALL DADE TROPICAL 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 Com Florida document number L16000027936	pany were filed on $\frac{02}{}$	09/2016	a	nd ass	igned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	l liability company he	<u>re</u> :			
The new name must be distinguishable and contain the words "Limited	Liability Company," the de	signation "LLC" or the	abbreviat	tion "L.I	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRES	<u></u>				
					
Enter new mailing address, if applicable:					<u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)					
	-				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address. Name of New Registered Agent:		our records, <u>ent</u>	er the a		2
			77.	در د ی	
New Registered Office Address:	Enter Flori	da street address	107	, 7 K	
		, Florida	£	ද ද	
	City	, 1 1011411	Zip	Code	
New Registered Agent's Signature, if changing Registered A	gent:				
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	plete performance of i It as provided for in C	ny duties, and I at hapter 605, F.S. C	n famili Dr, if this	ar witi s docu	h and ment is
Ī	f Changing Registered Ag	ent, <u>Signature of New</u>	Registere	d Agen	<u> </u>

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MRG	JENNY P AGUILAR	21551 SW 280 ST	□ Add
		HOMESTEAD FL 33031	■ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			Change
			Ade3
			☐ Change
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ective date, if other than the date effective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Depart	specific and cannot be prior t does not meet the applica	to date of filing or mable statutory filing	(option ore than 90 days after fil g requirements, this d	ing.) Pursuan	t to 605 be list
record specifies a delayed el he 90th day after the record		t an effective t	ime, at 12:01 a.r	n. on the	earli
ed MARCH 17TH	, 2016				

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Filing Fee: \$25.00