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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO		gistration Sec vision of Corp				
SI II	вјест	KC II 825, L				
301	ыст	·		Liability Company		
The	e enclose	ed Articles of A	Amendment and fee(s) are submitt	ted for filing.		
Ple	ase retui	n all correspor	ndence concerning this matter to t	he following:		
			Alvaro Castillo			
				Name of Person		-
			Castillo & Associates			
				Firm/Company		-
1390 Brickell Avenue Suite 200						
				Address		-
			Miami, FL 33131			
			(City/State and Zip Code		-
			alvaro@alvarocastillopa.com			
			E-mail address: (to b	e used for future annual re	port notification)	
For	r further	information co	oncerning this matter, please call:			
Αl	varo Ca	stillo		305 371-	-5540 Daytime Telephone Number	
•		Name of	Person	Area Code	Daytime Telephone Number	7
En	closed is	s a check for th	e following amount:			
	\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certific Certifie	ate of Status &

MAILING ADDRESS:

TO:

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

	C II 825, LLC	
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L16000062530	mpany were filed on <u>03/30/2016</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRE	ESS))
		me. In
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		222
IMMANING AUGUSESS MAT BE A FOST OFFICE BOAT		\$5 m
B. If amending the registered agent and/or registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:		nter the name of the new
Trom Avgustored Ville Addiess.	Enter Florida street address	
	. Florid	a
	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	ROSSANA V DE PRATI	1390 Brickell Avenue Suite 200	
		Miami, FL 33131	■ Remove
			Change
MGR	Eliana Hidalgo	1390 Brickell Avenue Suite 200	Add
		Miami, FL 33131	☐ Remove
			☐ Change
···-			Add
			□ Remove
			Add A CONTRACTOR 20
			Change
			Add
			Remove
			Change
		 	Remove
			□ Change

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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.		
the record specifies a delayed effective date, but not an effective time, at) The 90th day after the record is filed.	12:01 a.m. on the ear	lier of:
Dated December 12/1 1 2016.		
MULL		
Signature of a member of authorized representative of a member	oer	

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Page 3 of 3

Filing Fee: \$25.00