L160000 77916

(Re	equestor's Name)		
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	; #)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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JUL 0 6 2016 S. YOUNG

COVER LETTER

Registration Section

Division of Cor	rporations		
	FIVE LLC		
SUBJECT:	Name of Limi	ited Liability Company	
	Amendment and fee(s) are sub-	-	
Please return all correspondence	ondence concerning this matter	to the following:	
	Kenneth Damas		
		Name of Person	
	Adorno-Cunill & Damas, PL		
		Firm/Company	
	1000 Brickell Avenue		
		Address	5 AFF
	Miami, Florida 33131		
		City/State and Zip Code	
	lindadagosto@gmail.com	to be used for future annual report notific	P. F. F.
For further information	concerning this matter, please c	•	PH 4: 58
Kenneth Damas		305 381-9999 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)
Regis Divis	LING ADDRESS: tration Section ion of Corporations Box 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building	
	nassee, FL 32314	2661 Executive Cen	ter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SO MI VE FIVE L.L.C.		•		
(Name of	the Limited Liability Company as it r appears on our records.) (A Limited Liability Company)	low Florida		
The Articles of Organization for this Limited Liability Florida document number L16000077916	Company were filed on 04/21/201	6	_ and ass	igned
	·'			
This amendment is submitted to amend the following	:			
A. If amending name, enter the new name of the lir	nited liability company here:			
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designat	ion "LLC" or the abbre	viation "L.	L.C."
Enter new principal offices address, if applicable:				No.
(Principal office address MUST BE A STREET ADD	ORESS)			
of the party of the address in Col bit A STABLE ADD				SAT
			ان	
Enter new mailing address, if applicable:			I Wd	7100
(Mailing address MAY BE A POST OFFICE BOX)			ດັ :.	
•			ىن	75.
B. If amending the registered agent and/or registered agent and/or the new registered office ad-		ls, <u>enter the name</u>	of the no	<u>ew</u>
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	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
			□ Add
			☐ Remove
			Change
MGR	DIAZ P., JOSE G	200 Biscayne Blvd. Way, #508	Add
		MIAMI, FL 33131	Remove
			16 CHAINER HANDE
			1 (2) 20
			Add SELO
		Un Change	
MGR 2274 In	2274 Investments Inc.	200 Biscayne Blvd. Way, #508	■ Add
		Miami, Florida 33131	□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
MGR	1802 Investments Inc.	14750 SW 26 Street Suite 215	Add
		Miami, Florida 33185	Remove
			□ Change

If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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•	July 2	
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		The state of
Note: docum	tive date, if other than the date of filing:	as the
) The	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of each day after the record is filed.	OT:
Dated	1/23/20/6 -1-1	
Date	A May 2	
	Signature of a hember or authorized representative of a member Jose Gregorio Diaz P.	
	Typed or printed name of signee	
	/	

Filing Fee: \$25.00