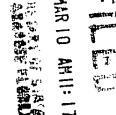
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Added Current LLC Name to Can My 313
Office Lise Only V



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03/10/17--01019--007 **25.00



M. MILLIGAN MAR 1 3 2017

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT:	The Sh Name of Lim	top Miami, LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	f	Han Yepez Name of Person	
		Name of Person	
		Firm/Company	
	8879 8	W 22 Terr	
		Bay FC 331 City/State and Zip Code	
	allan. m	. yepez @ g mail. co	Gootion)
For further information c	oncerning this matter, please ca	·	ncanon)
Allan	Tepez	at (305) 748 - Area Code Daytimo	0139
Name o	i Person	Area Code Daytimo	e Telephone Number
Enclosed is a check for the	=		
\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miani, Luc
Liability Company as it now appears on our records.) Florida Limited Liability Company)
oility Company were filed on 5/6/16 and issigned
ring:
he limited liability company here:
Z LLC ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
le:
ADDRESS)
<u> </u>
registered office address on our records, enter the name of the neee address here:
Enter Florida street address
, Florida

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
		·	Add
			Remove
			Change
			Add
			Remove
			Add
			☐ Remove
			☐ Change
	 		Add
			□ Remove
			☐ Change
	****		Add
			□ Remove
			□ Change

D. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if nece	essary.)
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	f /	
Note: I	e date, if other than the date of filing: 3/5/17 (option tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after if the date inserted in this block does not meet the applicable statutory filing requirements, this not's effective date on the Department of State's records.	onal) filing.) Pursuant to 605.0207 (3 date will not be listed as the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a 90th day after the record is filed.	i.m. on the earlier of:
Dated _	March 5, 2017.	
	Signature of a member or authorized representative of a member	20
		HAR
	Allan Ye pez Typed or printed name of signee	A A
	Page 2 of 2	

Page 3 of 3

Filing Fee: \$25.00