Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000173274 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023

: (850)205-8842 : (850)878-5368 Phone Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PASEO SUN, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ഗ

JUL 2 0 2016

Y SULKER

7/19/2016 11:22:23 AM From: To: 8506176383( 2/5 )

## **COVER LETTER**

		COVERLETTER	
TO: Registration Se Division of Con			
Paseo Sun. SUBJECT:	LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The analoged Actions of	Amendment and fee(s) are sub-	mittad for filing	
	ondence concerning this matter	·	
Flease feturi all correspo	ondence concerning this matter	to the following.	
	Osvaldo F. Torres		
		Name of Person	
	Torres Law, P.A.		
		Finn/Company	
	888 Southeast Third Aven	ue, Suite 400	
		Address	
	Fort Lauderdale, Florida 3	3316	
		City/State and Zip Code	<del></del>
	ozzie@torreslaw.net		
	E-mail address: (	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ea	ull:	
Osvaldo F. Torres		754 300-5815	
Name o	f Person	at ()Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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
Cliffon Building
2661 Executive Center Circle Tallahassee, FL 32301

7/19/2016 11:22:23 AM From: To: 8506176383( 3/5 )

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Paseo Sun. LLC			
(Name of the Limited Liability Company a (A Florida Limited Liabi	s it now appears on o	our records.)	<del>,</del>
The Articles of Organization for this Limited Liability Company we Florida document number L16000113092	re filed on June 10.	2016	and assigned
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 C	Company," the designa	ition "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
_			<u>-</u>
			<u>.</u>
Enter new mailing address, if applicable:			<u>.</u> <u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)			
			302. <u> </u>
_		,	<u> </u>
B. If amending the registered agent and/or registered office	address on our	records, enter	the name of the
registered agent and/or the new registered office address here:			± 5 € €
			- 5 - 5
Name of New Registered Agent:		" <i>د</i>	·
New Registered Office Address:			
	Enter Florida sti	eet address	
		. Florida	
	City	, 1 101101#	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

7/19/2016 11:22:23 AM From: To: 8506176383( 4/5 )

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	Luis Guille <del>rn</del> o Bohórquez Urdaneta	6940 NW 106th Avenue Doral, Florida 33178	<b>■</b> Add
			□ Remove
			☐ Change
<del></del>			Add
			☐ Remove
			☐ Change
			Add
			Remove
			2.0 □ Change
			© Control of the con
			CO C
			Change
		· .	
			□ Remove
			□ Change
			□ Add
			Remove
			D Change

Effective date, if other than the date of filing:		`		dditional sheets, ij	والمراجعة الحارات والمراجعة والمراجع	······································	apro tena
16. UL 9 M 9. 52 18. UL 9 M 9. 52 19. UL 9 M 9. 52							
16. UL 9 M 9. 52 18. UL 9 M 9. 52 19. UL 9 M 9. 52							
16. UL 9 M 9. 52 18. UL 9 M 9. 52 19. UL 9 M 9. 52							
16. UL 9 M 9. 52 18. UL 9 M 9. 52 19. UL 9 M 9. 52							<del></del>
16 JUL 19 AM 9:52  TELL/HASSEE FLORDA							<del></del>
16 JUL 19 AM 9:52  TELL/HASSEE FLORDA			<del></del>				<del></del>
16 JUL 19 AM 9:52  TELL/HASSEE FLORDA				,			
16 JUL 19 AM 9:52  TELL/HASSEE FLORDA							
HASSEE, FLORIDA							
HASSEE, FLORIDA			<del></del>	<del></del>			
HASSEE, FLORIDA		<del></del>		· · · · · · · · · · · · · · · · · · ·			
HASSEE, FLORIDA		<del>-</del>		-			<del></del>
HASSEE, FLORIDA			····				
552 552 552					File Sin	16	
552 552 552				······································	また 25元	E	<del></del>
FLORIDA 52		····	<del></del>		(J) 1 · ·		<u> </u>
		<del></del>			713	-	
man at the North All Aller Alex Bade of Millians	•	· <del></del>	· <del>········</del>	_ <del></del>	10		<u>r</u>
Effective date, if other than the date of filing:(optional)					10,		
	ffective date, if other than the date	of filing:		(	(optional)		
	ocument's effective date on the Departm	ment of State's reco	rds.				
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.		المعمل المعالم المعالم		ulter blance at 43	.01		
document's effective date on the Department of State's records.	e record specifies a delayed erre The 90th day after the record is	s filed.	not an enec	ive time, at 12:	or s.m. or	the e	arlier i
document's effective date on the Department of State's records.  The sound specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.  The sound and after the record is filed.	July 15	2016					
document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.  The 90th day after the record is filed.			· ·				
document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.  The 90th day after the record is filed.	alcu	boli	not l				

Page 3 of 3

Filing Fee: \$25.00