## Electronic viling Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: FASTKIT CORP

Account Number : I20100000009

Fax Number

: (305)599-0839 : (305)592-9591

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TORTUGUEITOR LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

S. YOUNG

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Α.

V.

TORTUGUEITOR LLC			
(Name of the Limi	ted Liability Compan (A Florida Limited Li	v at it now appears on our records.) ability Clompany)	
The Articles of Organization for this Limited L	iability Company v	verc filed on 08/03/2016	and assigned
Florida document number L16000145639	<del></del>		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liabili	ity company here:	
			SE SE
The new name must be distinguishable and contain the	vords "Limited Liability	y Company," the designation "LLC" or the abbre	eviation L.C.
Enter new principal offices address, if applie	able:		
(Principal office address MUST BE A STREE	TADDRESS)		- Mege
			· 2 등류
Enter new mailing address, if applicable:			D*
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
`			
B. If amending the registered agent and	or registered offi	ce address on our records, enter th	e name of the new
registered agent and/or the new registered of		<u> </u>	- name of -os age
Name of New Registered Agent:	VALERIA TOBA	\L	······································
New Registered Office Address:	19501 E COUNT	RY CLUB DR BLDG 9 UNIT 507	
		Enter Florida street address	
	MIAMI	, 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:

1

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ESTEBAN G SAPIR	19501 E COUNTRY CLUB DR	
		BLDG 9 UNIT 507	■ Remove
		MIAMI FL 33180	☐ Change
AMBR	VALERIA SABOL	1950) E COUNTRY CLUB DR	Add
		BLDG 9 UNIT 507	Remove
		MIAMI FL 33180	Change
MGR	VALERIA TOBAL	1950) E COUNTRY CLUB DR	SECRI FALLA 16
<del></del>		BLDG 9 UNIT 507	G HASSES Removes
		MIAMI FL 33180	A CO
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			☐ Remove
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			□ Add
			☐ Remove
			C) Change
****			D Add
			□ Remove
			☐ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessa		
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Effectiv	c date, if other than the date of filing:  (optional	`	
Note: I	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days efter filing f the date inserted in this block does not meet the applicable statutory filing requirements, this date nt's effective date on the Department of State's records.	i) Pursuant to will not be	605,020 listed a
ne reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. 30th day after the record is filed.	on the ez	ırlier o
Dated _	8/09/2016 4.00 P.M		
•	Node a Told		
	Signature of a member or authorized representative of a member	<del></del>	
	VALERIA TOBAL		

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Filing Fee: \$25.00