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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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(Do	ocument Number)	
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D. SCOTT JAN 1 8 2017

COVER LETTER

· Divi	sion of Corp	porations		
	SOUTH MI	TSUBISHI LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspoi	ndence concerning this matter	to the following:	
		BIROL KARAN		
			Name of Person	
		SOUTH MITSUBISHI LL	.c	
			Firm/Company	
		8523 South Dixie Highway	y	
			Address	
		Miami FL 33143		
			City/State and Zip Code	
			to be used for future annual report no	~~~~ ~~~
For further in	formation co	oncerning this matter, please ca	all:	EGG & T
BIROL KAR	AN		305 321 0349 at ()	
	Name of	Person	Area Code Dayti	me Telephone Number 7.10 PH + 36
Enclosed is a	check for th	e following amount:		36
☑ \$25,00 Fi	ling Fce	□ \$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:

TO:

Registration Section

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

SOUTH MITSUBISHI LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		188 1 F L F L F L F L F L F L F L F L F L F
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, g	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flori	da
	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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JUAN P GILL	10722 NW 76 LANE, DORAL FL	□ A 4 3
			☑ Remove
			☐ Change
	···		□ Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add
		- <u></u>	Remove
			Tage Dange
			Add TO
			Add
		<u></u>	☐ Change
			□ Add
			□ Remove
			□ Change

If,am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
If an et Note:	tive date, if other than the date of filing: [Ot/01/2017] [Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020. [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	01 12 2017
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00