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COVER LETTER

SUBJECT:		<u> </u>	10.544	
	BJECT: Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. asse return all correspondence concerning this matter to the following: TAIME FERRE LCC Firm/Company 8312 NW CS + LC Firm/Company 8312 NW CS + LC Firm/Company 1 Address City/State and Zip Code 2 PORTS LLC City/State and Zip Code 3 PORTS LLC Address Further information concerning this matter, please call: 1 AIME FERRE LA Area Code Daytime Telephone Number 1 S25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy			
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Please return all correspo	ondence concerning this matter	to the following:		
	JAIA	1F FFRREIP Name of Person	-A	
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		City/State and Zip Code	166	T APR 2
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For further information of	concerning this matter, please c	all:		#
•		at (786) 617. Area Code Daytime	36 44 Telephone Number	9
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee				atus &

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

(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on January 17, 2017 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 Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	5
Enter new mailing address, if applicable:	R 21 SSEE
(Mailing address MAY BE A POST OFFICE BOX)	# FO
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the new there:
Name of New Registered Agent:	JAIME FERREIRA
New Registered Office Address:	8312 NW 68th St Enter Florida street address
	MAMI ,Florida 33166 City Zip Code
New Degistered Agent's Signature if changing Degistered As	zomě.

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

Page 1 of 3

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 **Address Type of Action Title Name** JAIME FERREIRA 3250W97+5+ Higlor 33018 (XAdd GILMAR MONDET 9631 FOUNTAINBLEAU BLYD APT SOLD REMOVE MIAMIFL 33172 ☐ Change MGR MARIA C TORO 3250W97th St Hialcah 33018 GAdd SCRGIO CASTRO 8312 NW 68th STMIRMI, ☐ Change ☐ Chang

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record	specifies a delayed h day after the rec		ate, but not	an effective	time, at 12:	01 a.m. on the	e earlier of
The 901		4.	O - 1 -				
	April	13.4	2017 Line	<u>. </u>			

Page 3 of 3

Filing Fee: \$25.00