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D. SCOTT FEB 1 2017

COVER LETTER

TO:

TO:	Registration Se Division of Cor			
SUBJE	AVANTI 1	8 INVESTORS, LLC		
SOBJE		Name of Limi	ited Liability Company	
		Amendment and fee(s) are submondence concerning this matter	_	
		MARIANO GONZALEZ I	BAROLDI	
			Name of Person	
		AVANTI 18 INVESTORS	, LLC	
Firm/Company				
	11251 NW 20 STREET, SUITE 119,			
			Address	
		MIAMI, FL 33172		
			City/State and Zip Code	
		mariano@mybluestar.us		IS = ==============================
For furth	ner information co	E-mail address: (t oncerning this matter, please ca	to be used for future annual report notification.	石門 吳 五
MARIA	NO GONZALE	Z BAROLDI	305 4369702	
	Name o	f Person	at () Area Code Daytime Tel	cphone Number 2 2 2
Enclosed	is a check for th	ne following amount:		
\$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)
		ING ADDRESS: ation Section	STREET/COURIER Registration Section	ADDRESS:

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AVANTI 18 INVESTORS, LLC		
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 01/20/2017	and assigned
Florida document number L17000014530	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited 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 ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi	stered office address on our records ent	er the name of the ne
registered agent and/or the new registered office add		
		53 33 [
Name of New Registered Agent:		MG 7
		72 3
New Registered Office Address:	Enter Florida street address	0 N S
	. Florida	4
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JUAN C. GONZALEZ BAROLDI	11251 NW 20 STREET, Suite 119	🗖 Add
		MIAMI, FL 33172	Remove
			☐ Change
MGR	CARLOTTA FRANCESCA DE LI	11251 NW 20 STREET, Suite 119	Add
		MIAMI, FL 33172	■ Remove
			☐ Change
MGR	JUAN C. GONZALEZ BAROLDI 11251 NW 20	11251 NW 20 STREET, Suite 119	□ Add
		MIAMI, FL 33172	■ Remove
			Change
MGR	MARIANO GONZALEZ BAROLI	11251 NW 20 STREET, Suite 119	■ Add
		MIAMI, FL 33172	□ Remove
•			☐ Change
			Add SECULAR Remove Remove Add Remove Remove Remove Remove
			Change

			81 W.W.
<u> </u>			
ffective date, if other than the dat an effective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Depar	e specific and cannot be prior to do does not meet the applicable	ate of filing or more than 90 days:	optional) after filing.) Pursuant to 605.020 this date will not be listed a
e record specifies a delayed e The 90th day after the record	ffective date, but not and is filed.	n effective time, at 12:0	
JANUARY 26th	2017		ANSSE
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Filing Fee: \$25.00