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Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	
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Office Use Only



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D. SCOTT OCT 1 6 2017

COVER LETTER

		stration Section of Corpe					
SUBJEC		2011 PROP, I	LLC				
3012.130	· · -		Name of Lim	ted Liability Company			
The enclo	osed .	Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please rei	turn a	II correspond	lence concerning this matter	to the following:			
			JOSE LUIS GARCIA COR	RTELL			
				Name of Person			
				Firm/Company			
			2929 SW 3RD AVE. SUIT	E 230		ng Fee, — cof Status & Copy	
			MIAMI, FL 33129	Address			
			PEPECORTELL@HOTMA	City/State and Zip Code			
				o be used for future annual report no	tification)		
For furthe	er inf	ormation con	cerning this matter, please ca	11:		6.0	
JOSE LU	JIS G	ARCIA COF		305 300-7086 at ()		·; ————————————————————————————————————	11
		Name of P	erson	Area Code Daytir	me Telephone Number	12.	
Enclosed	is a c	heck for the	following amount:		· · · · · · · · · · · · · · · · · · ·	- .	\bigcirc
□ \$25.0	00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ing Fee, —	

MAILING ADDRESS:

TO:

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

2011 PROP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Liability Company were	filed on 03/20/2017	and assigned	d
lowing:			
of the limited liability	company here:		
words "Limited Liability Co	ompany," the designation "LLC" o	or the abbreviation "L.L.C."	
cable:			
ET ADDRESS)	·		
//or registered office	address on our records,	enter the name of the	<u>ne new</u>
ELIANA RUIZ		\$ 25 T	<u>.</u>
2929 SW 3RD AVE	SUITE 230.		J
MIAMI	Enter Florida street address	£	. —
	, Flori	ida 33149 Zin Code	
	lowing: of the limited liability of the limited Liability Concepts: ET ADDRESS) BOX) FROM Cable: ELIANA RUIZ 2929 SW 3RD AVE MIAMI	lowing: of the limited liability company here: words "Limited Liability Company," the designation "LLC" of cable: ET ADDRESS) // Or registered office address on our records, office address here: ELIANA RUIZ 2929 SW 3RD AVE SUITE 230. Enter Florida street address	lowing: of the limited liability company here: words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." cable: ET ADDRESS) Wor registered office address on our records, enter the pame of the office address here: ELIANA RUIZ 2929 SW 3RD AVE SUITE 230. Enter Florida street address MIAMI Florida 33129

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.

f 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
MBR	JOSE LUIS GARCIA CORTELL	2929 SW 3RD AVE	⊒ Add
		SUITE 230	Remove
		MIAMI, FL 33129	Change
MGR	ELIANA RUIZ	2929 SW 3RD AVE	 Add
		SUITE 230	
		MIAMI, FL 33129	
MBR A	ALBERTO PEROSCH	2929 SW 3RD AVE	□ Add
		SUITE 230	■ Remove
		MIAMI, FL 33129	☐ Change
			□ Remove
			☐ Change
			□ Add
			Remove
			Change Change
			Add Remove
			☐ Change

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing: (optional) ective 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 605,0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t ent's effective date on the Department of State's records.
the rec) The	ord 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 _.	October 3rd 2017
	Signature of a member or authorized representative of a member
	Alberto Perasch Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00