## L170000 43587

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer.	
:		





800307553028



RECEIVED

J. HARRIE

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: 12000000195	
	REFERENCE	7732494	
	AUTHORIZATION	Spelle de man	
	COST LIMIT	: \$ 25.00	
ORDER DATE	: January 3, 2018	,	-
ORDER TIME	: 12:14 PM		
ORDER NO.	: 992624-185		
CUSTOMER NO	: 7732494		
	DOMESTIC AM	AMENDMENT FILING	
NAME	: AREAS CBH LAX	JV, LLC	
EFFECT	FIVE DATE:		
	LES OF AMENDMENT FED ARTICLES OF INCO	CORPORATION	
PLEASE RETUR	RN THE FOLLOWING AS	PROOF OF FILING:	
XX PLA	FIFIED COPY IN STAMPED COPY FIFICATE OF GOOD STA	CANDING	

EXAMINER'S INITIALS:

CONTACT PERSON: Roxanne Turner -- EXT#

## **COVER LETTER**

AREAS C SUBJECT:		5. 11.11.12C	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kaitlyn Deptula		
	-	Name of Person	<u> </u>
	CSC		
		Firm/Company	
	251 Little Falls Drive		
	<del></del>	Address	
	Wilmington, DE 19808		
	annualreports@cscinfo.com	City/State and Zip Code	
	, •	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
CSC		800 9800 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

MAILING ADDRESS:

Registration Section

**Division of Corporations** 

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

(Name of the Limited Liability Company as it now appears) (A Florida Limited Liability Company)	on our records.)
(A Florida Limited Liability Company)	
he Articles of Organization for this Limited Liability Company were filed on 03/2	0/2017 and assigned
orida document number L17000063587	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company her	2:
	-
he new name must be distinguishable and contain the words "Limited Liability Company." the des	ignation "LLC" or the abbreviation "L.L.C."
	-
inter new principal offices address, if applicable:	~~~
Principal office address MUST BE A STREET ADDRESS)	· c
	<u> </u>
	·
nter new mailing address, if applicable:	· 75.
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	( (
	•
. If amending the registered agent and/or registered office address on o	our records, ente <u>r the name of th</u>
egistered agent and/or the new registered office address here:	<del></del>
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:	
	a street address

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.

Cin

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
CEO	XAVIER RABELI.	5301 BLUE LAGOON DR. #690 N	Add
			■ Remove
			Change
VP	KIRK WEISS	5301 BLUE LAGOON DR. #690 N	
			■ Remove
			Change
VP	ALBERTO SERRATOS	5301 BLUE LAGOON DR. #690 N	
			■ Remove
			Change
MGR	JOSE ALBERTO SERRATOS	5301 BLUE LAGOON DR. #690 N	
			□ Remove
			Change
			Ādd ,
			Remove
			Change
			□ Xàa
			☐ Remove
			☐ Change

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				( <b>( 1</b> )	
effective date is lis	ther than the date of fili sted, the date must be specific :	ind cannot be prior to da	ite of filing or more than 90	(optional) ) days after filing.) P	arsuant to 605.0
<u>e:</u> If the date ins ument's effective	serted in this block does no a date on the Department o	t meet the applicable f State's records.	statutory filing requiren	nents, this date wi	ll not be listed
	, <b></b>				
	es a delayed effective after the record is filed		effective time, at	12:01 a.m. on	the earlier
.a	January 03	2018			
	<del> </del>	<u> </u>		***	rsa Ed
<u>-</u>					e
		/S/ Jose Alber	to Serratos		· · · · ·
	Signature of	/S/ Jose Alber a member or authorized	d representative of a memb	рег -	<u> </u>
	Signature of erto Serratos	/S/ Jose Alber a member or authorized	to Serratos d representative of a memb	рег	· · · · · · · · · · · · · · · · · · ·

Page 3 of 3

Filing Fee: \$25.00