117000085674

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
ertified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only

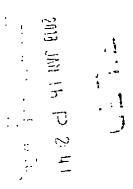


300307587313

01/17/18--01005--029 **25.00

RECEIVED

JAN 1 6 2018



11720

COVER LETTER

Division of Co	rporations				
Aviano Int	ernational LLC				
30000001.	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:			
	Douglas Robinson				
		Name of Person			
	Y & Y Business Consultar	nts, LLC			
Firm/Company					
175 SW 7th Street Suite 1524					
		Address			
	Miami, FL 33130				
		City/State and Zip Code			
	drobinson@yyybusiness.co		<u> </u>	21113	١
For further information c	E-mail address: (concerning this matter, please co	to be used for future annual report notifi all:	cation)	2018 1111 115	: 1 : : :
Doug Robinson		305 200-5004		- T	
Name o	of Person	Area Code Daytime	Telephone Number		,, °
Enclosed is a check for the	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 Certificate o Certified Co (additional copy	of Status &	

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

AVIANO INTERNATION LLC

mpany has been notified in writing of this change.

(A Fiorida Limited Lie	(as it now appears on our records.) ability Company)				
The Articles of Organization for this Limited Liability Company w	ere filed on 4/17/2017	and assigned			
riorida document number					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ty company here:				
AVIANO INTERNATIONAL LLC					
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abb	previation "L.L.C."			
Enter new principal offices address, if applicable:	78 SW 7th Street Suite 500				
(Principal office address MUST BE A STREET ADDRESS)	Miami FL 33130				
		· \ · · · · · · · · · · · · · · · ·			
Enter new mailing address, if applicable:	78 SW 7th Street Suite 500				
Mailing address MAY BE A POST OFFICE BOX)	Miami FL 33130				
B. If amending the registered agent and/or registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter</u>	the name of the r			
registered agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter</u>	the name of the r			
B. If amending the registered agent and/or registered office assert and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		27			
registered agent and/or the new registered office address here: Name of New Registered Agent:		27			
registered agent and/or the new registered office address here: Name of New Registered Agent:		27			

If Changing Registered Agent, Signature of New Registered Agent

zing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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>	<u>Address</u>	Type of Action
			□ Remove
			☐ Change
			☐ Add
			☐ Remove
			Change
			
		· · · · · · · · · · · · · · · · · · ·	
			□ Change
			□ Add
			Change 7
			☐ Add
			□ Change
			□ Add
			☐ Remove
			□ Change

						
				•		
				-		
				-		
				 		
						
		-				
				, _		
						
					<u> </u>	
					6103	1
	-		-		<u>-</u>	
fective dute if other t	han the date of filin	a·		(0)		1
fective date, if other to effective date is listed, the	date must be specific and	d cannot be prior t	o date of filing or	more than 90 days a	iller fifing:) Pursuant t	o 6 0 5.0 2 0
ote: If the date inserted cument's effective date	in this block does not r	neet the applica	ible statutory fili	ng requirements.	this date will not be	e listed a:
	•				. ?: 1	
record specifies a (The 90th day after			an effective	time, at 12:0	1 a.m. on the e	earlier o
ited	January 11	2018				
<u></u>		·	<u>-</u> ,			
	Signature of a	member or author	rized representative	n of a member		_
	Signature (II a	memoer or author	гергезений (e or a memore		
Steeven A Otto	1 1					

Page 3 of 3

Filing Fee: \$25.00