Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000210869 3)))



H180002108693ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Componations Fax Number : (858)617-6383

Account Name : TORRES & VADILLO, LLP

Account Number : T201500000038 Phone : [305]485-9780

: (305)485-9788 Fax Number : {305}436-0191

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one small address please. **

Emmil Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MODERN 10288 LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu Help Ø

> **B FIGUEROA** JUL 24 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MODERN 10288 LLC			
(Name of the Limited Liability Company as It now appear (A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company were filed on 05/		;	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company her	<u>re</u> :		
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	signation "LLC" or the	he abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		- 	
3. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here:	our records, ent		증
Name of New Registered Agont:		P- 1-	راد 12
New Registered Office Address:			سر د <i>ټ</i>
Enser Florid	la street address	1,	Ī.
	, Florida	<u> 2</u> ;	
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

Title	Nume	Address	Type of Action
MGR	ANDRES ESIS	31 SE 5TH STREET	_
		SUITE 312	
		MIANUEL COLOR	Remove
		MIAMI, FL 33131	Change
			□ Add
			Change
			Add
			Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
		-	Change
			☐ Remove
			Change

s it amending any other inform	nation, enter change(s) here: (Attach additional s	sheeis, if necessary.)
		
-		
·		
· · · · · · · · · · · · · · · · · · ·		
(If an effective date is listed, the date m Note: If the date inserted in this i document's effective date on the	ed effective date, but not an effective time.	irements, this date will not be listed as the
Dated JULY 18	2018	281
* Man	The aurinous	2810 JUL
	Signature of a member or authorized representative of a mu	ember 🛴 🚨
MARITZA QUINONE	EZ PONTE, MEMBER	
	Typed or printed name of signee	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	Page 3 of 3	, -1

Filing Fee: \$25.00