## L17000157730

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	P WAIT	MAIL
	(Business Entity Name)	
<del> </del>	(Document Number)	<u> </u>
Certified Copies	Certificates of \$	Status
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OCT 17 2019

M. SOLOMON

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED AMENDMENT FOR:

16 WEST DILIDO, LLC

PLEASE RETURN A STAMPED COPY

CHECK# 8418 FOR: \$400.00 (\$25.00 for this filing)

THANK YOU!

## **COVER LETTER**

	gistration Servision of Corp			
SUBJECT:	16 WEST D	ILIDO, LLC		
		Name of Limit	ed Liability Company	
The enclose	d Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please retur	n all correspor	ndence concerning this matter to	o the following:	
		CARLOS GARCIA		
			Name of Person	<del></del>
		CARLOS GARCIA P.A		
		<del> </del>	Firm/Company	<del></del>
		500 SOUTH DIXIE HIGHV	WAY SUITE 202	
		<del>-</del>	Address	
		CORAL GABLES, FL 3314	46	
		CARLOS@CGPALAW.CO	City/State and Zip Code M	
		E-mail address: (to	be used for future annual report notific	cation)
For further	information co	oncerning this matter, please ca	11:	
CARLOS (	GARCIA		305 7792479 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
<b>■ \$25.00</b>	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 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

16 WEST DILIDO, LEC	Hilto Common to the same of th	de)
(Name of the Limited List (A Flor	billty Company as it now appears on our recorrida Limited Liability Company)	<u>03.</u> )
The Articles of Organization for this Limited Liability	y Company were filed on 07/24/2017	and assigned
Florida document number L17000157730	<del>.</del>	
This amendment is submitted to amend the following:	:	ر ب بستار
<b>3</b>		Y 5
A. If amending name, enter the new name of the li	imited liability company here:	<u></u>
		==
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LL	C" or the abbreviation "E.L.C."
•		, o
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or reg	gistered office address on our record	ds, enter the name of the new
registered agent and/or the new registered office ac		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street addre	PSS
•	-	n • 1
	, F	lorida
	City	ap over

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>	<u>Address</u>	Type of Action
MGR	LUIS A. IREGUI	500 S. Dixie Highway Suite 202 Coral Gables, FL 33146	
			■ Remove
			☐ Change
MGR	OSCAR BJARNER ICAZA	Urbanización Mocoli Golf Club, Edificio Golf 102A . Apt 301.	
		Samborondon, Ecuador.	Remove
			Change
MGR	IVAN GAROFALO	Urbanización Laguna del Sol, Mz. J, Villa 17, Km 8 Via	
		Puntilla -Samborondon, Ecuador	☐ Remove
			. Si
MGR	ERNESTO A. ESTRADA	Plaza Lagos Town Center, Edificio Exedra, Piso 2, Km. 6.8	- C
		Puntilla -Samborondon, Ecuador	□ Remove
			☐ Change
			Remove
			Change
			□ Add
		<del></del>	Remove
			□ Change

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		<del></del>	
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			81. 11.
		<u> </u>	H: 26
		<del></del>	
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e. es	10/15/2019 ective date, if other than the date of filing: (optional)		
No	ective date; if other than the date of filing:  deflective date is listed, the date must be specific and council be prior to date of filing or more than 90 days after filing.) Pursuant ter if the date inserted in this block does not most the applicable statutory filing requirements, this date will not summent's effective date on the Department of State's records.	t to 605.0 be listed	207 (3)(t as the
If the (b) T	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the he 90th day after the record is filed.	earlier	of:
Dat	ed October 15 2019		
<i>s</i> *.	Signature of a member or authorized representative of a member	_	
<i>:</i>	Carlos Garcia		

•

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00