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## **COVER LETTER**

TO: Registration S Division of Co		
SUBJECT:	Name of Limited Liability Company	
	Name of Person	
	Law Firm of Rubio & Associates, P.A.	
	Firm/Company	
	8950 SW 74th Court, Stc. 1804	
Please return all correspondence concerning this matter to the following:  Humberto Rubio, Jr., Esq.  Name of Person  Law Firm of Rubio & Associates, P.A.  Firm/Company  8950 SW 74th Court, Stc. 1804  Address  Miami, Fl. 33156  City/State and Zip Code  hrubio@rubiolegal.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Humberto Rubio, Jr., Esq.  786  220-2061		
	Miami, FL 33156	
	-	
For further information	concerning this matter, please call:	
Humberto Rubio, Jr., E	Name of Limited Liability Company  ticles of Amendment and fee(s) are submitted for filing.  correspondence concerning this matter to the following:    Humberto Rubio, Jr., Esq.	
Name	of Person Area Code Daytime Telephone Number	,
Enclosed is a check for	the following amount:	
■ \$25.00 Filing Fee		atus &

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

it now appears on our records.) ty Company)	<del></del>
e filed on August 14, 2017	and assigned
company here:	
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	<u>-</u>
	- <u></u>
	1
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	in a
address on our records, enter the	-
Enter Florida street address	
Florida City	ip Code
	. Florida

## 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>	Address	Type of Action
MGR	Raiza Carnevalli	10275 Collins Avenue, Unit 1122	■ Add
		Bal Harbour, FL 33154	□ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			□ Remove
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			Change
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Fective date, if other than the date of filing:  October 30, 2017  In effective 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 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste requirement seffective date on the Department of State's records.  Percord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier the 90th day after the record is filed.		
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Signature of Amember or and on expresentative of a member	Signature of Amember or authorized representative of a member	

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Filing Fee: \$25.00