## L17000 184 625

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT MA	AIL
_	(Business Entity Name)	
<del></del>	(Document Number)	
	Certificates of Status _	
Special Instructions	s to Filing Officer:	
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## **COVER LETTER**

	Registration Se Division of Cor			
CUBICA	Enzo Colt I	LLC	•	
SUBJEC	, <u></u>	Name of Lim	ited Liability Company	<del></del>
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	endence concerning this matter	to the following:	
		Mario Tello		
			Name of Person	<del></del>
		BusinessBK LLC		
			Firm/Company	
		7791 NW 46th St Suite 21	9	
			Address	· <del></del>
		Doral, FL 33166		
		<del></del>	City/State and Zip Code	<del></del>
		info@businessbk.com		
		E-mail address: (	to be used for future annual report notifi	cation)
For furth	er information e	oncerning this matter, please ca	all:	
Mario T	ello		305 7980274	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	ne following amount:		
□ \$25.0	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 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

FILED

Enzo Colt LLC

2019 FEB 15 PM 6: 49

(Name of the Limited Liability Compa. (A Florida Limited I	ny as it now appears on our Jiability Company)	records) (
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000184625</u>	were filed on 08/29/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	488 NE 18th St Apt 200	7
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33132-1299	
Enter new mailing address, if applicable:	488 NE 18th St Apt 200	7
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33132-1299	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:		cords, enter the hame of the new
New Registered Office Address:		
New Registered Office Address.	Enter Florida street	address
		, Florida
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City	np Code

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	Enzo Coltellacci	1508 Bay Road Miami Beach, FL 33139	
		<del></del>	Remove
			☐ Change
MGR	Yasmin Coltellacci	488 NE 18th St Apt 2007 Miami, FL 33132-1299	
		<del></del>	☐ Remove
			Change
	<del></del>		
			☐ Remove
			Change
	<del> </del>	<del> </del>	□ Remove
			Change
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			□ Change
	<del></del>		
			□ Remove
			□ Change

will be	e changed to the following percentages:
Yasm	in Coltellacci> 100%
<del></del>	
i effective <u>te:</u> If the	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 605,0207 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a day after the record is filed.
.cd	February 12 /2019
.cu	$i \in A \cap F/II$
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00