

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.

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To:			7.
	Division of Corporations	24	2
	Fax Number : (850)617-6383 ·	:	. •
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From:		·	
	Account Name : ALVAREZ, SUAZO & ASSOCIATES	• •	ထု
	Account Number : I20130000076	F.	<u>ب</u> ت
	Phone : (305)388-7028	5	Œ
	Fax Number : (305)479-2705	سلق.	
Enter an:	the email address for this business entity to be used for mual report mailings. Enter only one email address please	future .	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIMJA HILLCREST 26 LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Diame of the Limited	SIMJA HILL	CREST 26 LLC	ars on our records.)	
(Name of the Limited	Florida Limited I	iability Company)		
The Articles of Organization for this Limited Lia Florida document numberL17000234669	bility Company	were filed on _	(1/13/2017	and assigned
This amendment is submitted to amend the follow				80
A. If amending name, enter the new name of	the limited liab	ility company	here:	22
NT. /				
NA/ The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the	designation "LLC" or t	the abbreviation *L.L.C.*
Enter new principal offices address, if applica	ble:	N/A		<u> </u>
(Principal office address MUST BE A STREET	<u>(ADDKESS)</u>			5.5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>80x)</u>	N/A U		
B. If amending the registered agent and/or the new registered of	or registered (lice address he	office address re:	on our records, <u>e</u>	nter the name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:		Enter l	Florida street address	
			, Floric	ia
		Сиу		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, '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:

itle	nthorized Member	Address	Type of Actio
igr	RUBEN DICHY	942 NE 193 TERR	
		MIAMI, FL 33179	■ Remove
		<u> </u>	Change
MGR	CAMILA L BENGIO DE DICHY	942 NE 193 TERR	□ Add
		MIAMI, FL 33179	■ Remove
MGR	CAROLINA F DICHY BENGIO	942 NE 193 TERR	DAdd
		MIAMI, FL 33179	■ Removo
			Change
MGR	ALEXANDRA R DICHY BENGIO	942 NE 193 TERR	Add
		MIAML FL 33179	■ Remove
			[] Change
MGR	ILANA R DICHY BENGIO	942 NE 193 TERR	
		MIAMT, FL 33179	Removo
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		MIAMI, FL 33179	Remove

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Effective (late, if other than the date of filing: (optional)	۸34
If an effectiv Note: If th	late, if other than the date of filing: 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 695, e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.	zd s
document'	s effective date on the Department of State's records.	
	and the earlier and the second of the second	3F
he record The 90	specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlies that after the record is filed.	-
Dated	01/22/2018	
	hamila L. Bengro de Decha	
	Signature of a member or authorized representative of a member	

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