# Lif 0000 62687

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
Thorest Thorest Thorest
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



200312045122

04/23/18--01051--018 \*\*25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Office Use Only

N COOPER APR 25 2018

## COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: ESPIRIT	U SANTO STO	res II uc.	
		ted Liability Company	
The enclosed Articles of Am Please return all corresponde		<u>-</u>	
	Naema	Bettran	
		Name of Person	
	Davos 7	Name of Person  Financial Corp.  Firm/Company	
		1 /	······································
	2465 8 R	Bayswore Dr, Su Address  33133  City/State and Zip Code	Te 310
		Address	
	Hai ,7	7 33/33	
-	Maemar. bet E-mail address: (t	Uraneda o be used for future annual report notific	cation)
For further information conc	erning this matter, please ca	11:	
Naema	r Beltran	at (305) 58805	535
Name of Pe	rson	Area Code Daytime	Telephone Number
Enclosed is a check for the fo	ollowing amount:		
\$25.00 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

18 APR 23	SECRETARY TALLAHASSE
A	프라
•••	STATE LORID
7	IDA 370

	<u></u> 08 <b>2</b>
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 03/08/2018, and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	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:	2986 Shippins AV, Niami Fl
(Principal office address MUST BE A STREET ADDRESS)	33133,
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2986 Shippins Av, Llam, 76
	33133
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:	
New Registered Office Address:	Enter Florida street address
	, Florida
<del></del>	City 7in 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 Address Type of Action Name NGR 2986 Shippins Av, Fsabel C □ Add Napolitano Llian Fr 33133 Remove ☐ Change MGR\_ CHRISTIAN J DE DUVEIRA 2986 ShipAns Av. □ Add May Fr 33133. Remove ☐ Change MGR Anabella Klajano 10244 NW BSHWTENACE Add Mai 7 33178. ☐ Remove ☐ Change MGR. Jose Mapolitano 2986 Shippins AV, **bbA**∕ May Fr 33133 ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
-		TAE SE
_	APR PR	LAH
		IASS
	>	
		FLO
	<del>.</del> 03	RIDA
	· · · · · · · · · · · · · · · · · · ·	
If an effec <u>Note:</u> If	e date, if other than the date of filing:	
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied of the cord is filed.	er of:
Dated _	Mau, April 19, 2013  Signature of a member or authorized representative of a member	
	Impo Des	
	Signature of a member or authorized representative of a member	
	Maemar Beccoran Davos Francial Corp.	

Page 3 of 3

Filing Fee: \$25.00