

Division of Corporations

Page 1 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H180001383423)))



H180001383423ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850) 617-6383

From:
 Account Name : SHUTTS & BOWEN, LLP
 Account Number : 076447300313
 Phone : (305) 347-6300
 Fax Number : (305) 347-7766

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: T.Gomez@shutts.com

RECEIVED

2018 MAY -2 AM 7:34

**DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LAROCHE CAPITAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

**J. LEGGETT
 MAY 03 2018**

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
LAROCHE CAPITAL, LLC
(a Florida Limited Liability Company)**

First: The Articles of Organization for this Limited Liability Company were filed on March 30, 2018 and assigned Florida document number L18000082128.

Second: The following amendments to the Articles of Organization were duly adopted by the Limited Liability Company:

ARTICLE I

The street address of the principal office of the Limited Liability Company is:

SHUTTS & BOWEN LLP
200 SOUTH BISCAYNE BOULEVARD (PAL)
SUITE 4100
MIAMI, FL 33131

The mailing address of the principal office of the Limited Liability Company is:


SHUTTS & BOWEN LLP
200 SOUTH BISCAYNE BOULEVARD (PAL)
SUITE 4100
MIAMI, FL 33131

ARTICLE II

The name and Florida street address of the registered agent is:

CORPORATION COMPANY OF MIAMI
200 SOUTH BISCAYNE BOULEVARD (PAL)
SUITE 4100
MIAMI, FL 33131

Effective as of May 2, 2018.



Maria Del Pilar Rubio, Esq.
Authorized Representative of the Member

18 MAY - 2 10:49 AM
CLERK OF COURT
CLERK OF COURT
CLERK OF COURT

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT AND REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 OF THE FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED AGENT AND REGISTERED OFFICE IN
THE STATE OF FLORIDA.

The name of the limited liability company is:

LAROCHE CAPITAL, LLC

The name and street address of the Florida registered agent and office are:

**CORPORATION COMPANY OF MIAMI
200 SOUTH BISCAYNE BOULEVARD (PAL)
SUITE 4100
MIAMI, FL 33131**

*Having been named as registered agent and to accept service of process for the above stated
limited liability company at the place designated in this certificate, 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 the statutes relating 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 in Chapter 605, F.S.*

By: _____

Gary J. Cohen
Gary J. Cohen

Date: May 2, 2018