L/800177353

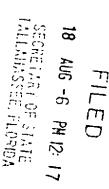
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700316466007

08/06/18--01/15 -501 (**.5.1)



O STAARAONS AUG 1 (1 2018

COVER LETTER

Division of Cor	rporations		
6300 Cold SUBJECT:	nial LLC		
	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Liliana Haedo		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	6300 Colonial LLC		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	8111 SW 183rd ST		
		Address	
	Palmetto Bay, Fl 33157		
		City/State and Zip Code	•
	sapia1@hotmail.com	to be used for future annual report notifi	-
For further information c	concerning this matter, please c		ication)
Liliana Haedo		786 234-0929	
	f Person		Telephone Number
Enclosed is a check for the	he following 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

6300 Colonial LLC

(Name of the Limited Liability Compa (A Florida Limited	inv as it now appears on our record	<u> s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L18000177353		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:	ED ED IT
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "1I.,C."
Enter new principal offices address, if applicable:	.— <u>.</u>	
(Principal office address MUST BE A STREET ADDRESS)	6300 E Colonial Dr	
	Orlando, Fl 32807	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	8111 SW 183rd ST	
The state of the s	Palmetto Bay , Fl 33157	
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:		
	, Fle	orida

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
			☐ Remove
			■ Change
MGR	Liliana Haedo	8111 SW 183rd ST	
		Palmetto Bay, Fl 33157	☐ Remove
			□ Change
			Add
			Remove
			Change
·			THE
			Remove P
			Remove Change
<u> </u>			□ Add
			Remove
			Change
	<u> </u>	<u> </u>	Add
	·		□ Remove
			□ Change

	·
	<u> </u>
·	
	FILED SSEED
	55 b M
	<u> </u>
	_
Effective date, if other than the date of filing:	7/26/18(optional)
(If an effective date is listed, the date must be specific and can	not be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department of State	
	, but not an effective time, at 12:01 a.m. on the earlier of:
) The 90th day after the record is filed.	
Dated July 30	018
	·
	<u> </u>
C Signature of a memi	ber or authorized representative of a member
Liliana Haedo	
Тур	ed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00