

L1900021184

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

FILED
19 SEP 12 PM 8:00
TALLAHASSEE, FLORIDA

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HORSE CLUB MIAMI LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

SEP 12 2019 12:16 PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Horse Club Miami LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/23/2019 and assigned
Florida document number 1.19000211184.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6155 SW 123 Ave

Miami, FL 33183

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6155 SW 123 Ave

Miami, FL 33183

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

6155 SW 123 Ave

Enter Florida street address

Miami

Florida

33183

City

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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Alexander M. Marin	6155 SW 123 Ave	<input type="checkbox"/> Add
		Miami, FL 33183	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Veronica Robert	6155 SW 123 Ave	<input type="checkbox"/> Add
		Miami, FL 33183	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Cristyan Serna	6155 SW 123 Ave	<input type="checkbox"/> Add
		Miami, FL 33183	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Carolina Sintes	6155 SW 123 Ave	<input type="checkbox"/> Add
		Miami, FL 33183	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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