Division of Corporations Electronic Filing Cover Sheet

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ie:

Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FOUNTAINEBLEAU ENTERPRISES LLC

Certificate of Status	0
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a Page 5 of 5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOUNTAINEBLEAU ENTERPRISES LLC	
(Name of the Elmited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on 04/20 Florida document number 1.20000105461	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	<u>e</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	the state of the s
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ZGZO HAY SECRETALLAHA
B. If amending the registered agent and/or registered office address on our reagent and/or the new registered office address here:	cords, enter the name of the new register
Name of New Registered Agent:	—————————————————————————————————————
New Registered Office Address: Enter Flori	do street address
Cay	FloridaZıp Code

New Registered Agent's Signature, it changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with t 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 addeor removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Adrian Jose Colina Villasinil	915 NW 1ST AVE	∰Add
		APT#HUIOS	
		MIAMI, FL 33136	
MOR	Mercedes del Carmen Colina Villasmil	915 NW 18T AVE	
		APT#HH05	
		MIAMI, FL 33136	
MGR	Adrian Eduardo Sandrea Colina	915 NW 1ST AVE	<u></u> ■ Add
		APT # H1105	
		MEANIE, FL 33136	
			(Jadd
			□Add
			□ □ Remove
			□ Change
			□Add
			□Remove
			□Change

	ADRIAN JOSE COLINA VILLASMIL 25%
	MERCEDES DEL CARMEN COLINA VILLASMIL. 25%
	ADRIAN EDUARDO SANDREA COLINA 25%
(H.	fective date, if other than the date of filing: on effective 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 605,0207 (3) one: If the date inserted in this block does not meet the applicable stantory filing requirements, this date will not be listed as the cument's effective date on the Department of State's records.
If the record	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed.
	ned 5/12 2020
- i)	

Typed or printed name of signee