

3/21/2017

Division of Corporations



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

From:
 Account Name : LEGALZOOM.COM INC.
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 SOBRINASIA, LLC**

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D. SCOTT
 MAR 22 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOBRINASIA, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01/09/2017 and assigned Florida document number L17000006286.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 540 NW 51st St.
Miami, FL 33127
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: PO Box 245834
Pembroke Pines FL 33024
(Mailing address MAY BE A POST OFFICE BOX)

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: _____
Enter Florida street address
_____, Florida
City: _____ Zip Code: _____

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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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
--------------	-------------	----------------	-----------------------

AMBR	Damian Silvera	7972 Pines Blvd., Apt. 245834	<input type="checkbox"/> Add
		Hollywood, FL 33024	<input checked="" type="checkbox"/> Remove

AMBR	Damian Silvera	540 NW 51st St.	<input checked="" type="checkbox"/> Add
		Miami, FL 33127	<input type="checkbox"/> Remove

			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MARCH 13 2017


Signature of a member or authorized representative of a member

Damian Silvera

Typed or printed name of signee

Page 3 of 3
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