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COVER LETTER

то:	Registration Se Division of Cor					
SUBJE	SUBJECT: KOBE ENGINEER AND CONSULT, LLC					
Name of Limited Liability Company						
The enc	losed Articles of A	Amendment and fee(s) are su	bmitted for filing.			
Please r	eturn all correspo	ndence concerning this matte	er to the following:			
		NICOL	LE J. HUESMANN, ESQUIRE Name of Person		_	
		NIC	OLE J. HUESMANN, P.	Α.	_	
		150 ALH	AMBRA CIRCLE, SUIT	E 1150	_	
		CORAL	_ GABLES, FLORIDA 3 City/State and Zip Code	3134	SE: FALL	
			nuesmann@olsrhh.com (to be used for future annual repor		AHASS	******
For furt	ner information co	oncerning this matter, please	call:		H 7	
	NICOLE Name of	J. HUESMANN Person	at (305) Area Code & D	305 858-0220 aytime Telephone Numb	STATE LORIDA)
Enclose	d is a check for th	e following amount:				
\$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certifie	iling Fee, cate of Status & ed Copy onal copy is en	
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registration S Division of C Clifton Build	orporations ing ve Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

KOBE ENGINEER AND CONSULT USA, 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	y were filed on	July 18, 2001	and assigned
Florida document numberL01000012334			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Compa	any," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	201 JEFFER	SON AVENUE	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI BEAC	H, FLORIDA 33	<u> </u>
		AH	
		ASS.	grownerson and
Enter new mailing address, if applicable:	201 JEFFER	SON AVENUE 🗒	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI BEAC	H, FLORIDA 33139	
		200	; ;; i N
		D A	"
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address here.		our records, <u>enter the</u>	e name of the new
Name of New Registered Agent: NICOLE J.	HUESMANN		
New Registered Office Address: 150 ALHAN	150 ALHAMBRA CIRCLE, SUITE 1150 Enter Florida street address		
СО	RAL GABLES	, Florida	33134
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		

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 of provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Andrea Zimmermann	201 JEFFERSON AVENUE MIAMI BEACH, FL 33139	Add Remove
MGR_	Carina Zimmermann	201 JEFFERSON AVENUE MIAMI BEACH, FL 33139	✓ Add Remove
MGRM	George R. Schroeder	441 SE 14th Avenue Pompano Beach, FL 33060	Add ☑ Remove
			Add Remove
			Add Remove
D. If ame	ending any other information, enter ch	nange(s) here: (Attach additional sheets, if neces.	Remove
	Article VI of the Articles of Organ		
	This Company is to be manager	managed and the members with a major	ity
<u>i</u> _	nterest may elect the manager(s).	
	·····		
Dated	August 3	2011 .	·····
	- '	mber or authorized representative of a member Andrea Zimmermann	
		Andrea zimmermann yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00