

L04000045794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

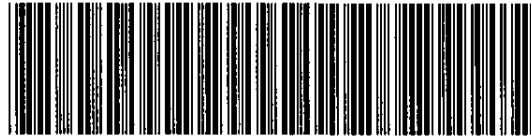
Special Instructions to Filing Officer:

A. LUNT

DEC 28 2012

EXAMINER

Office Use Only



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11/19/12--01046--021 **60.00

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MILLER COUNTY, FLORIDA

2012 DEC 27 PM 4:07

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2012

JUAN M SALAS-ROMER
900 CHAPEL ST. STE 620
NEW HAVEN, CT 06510

SUBJECT: STRATEGYON USA, LLC
Ref. Number: L04000045794

We have received your document for STRATEGYON USA, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 412A00027969

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Strategyon USA, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan M Salas-Romer

Name of Person

Strategyon USA, LLC

Firm/Company

900 Chapel St. Suite 620

Address

New Haven, CT 06510

City/State and Zip Code

juan@nhrproperties.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan Salas

Name of Person

at **(203) 4079775**

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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

Strategyon 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 were filed on June 17, 2004 and assigned
Florida document number L04000045794.

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:

(Principal office address MUST BE A STREET ADDRESS)

900 Chapel St. Suite 620

New Haven, CT 06510

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

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

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 608, 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 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>	<u>Address</u>	<u>Type of Action</u>
	Strategyon C.A.	900 Chapel St. Suite 620	☐ Add
		New Haven, CT 06510	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

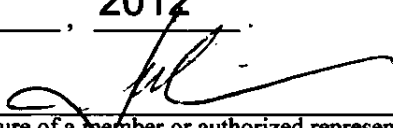
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Strategyon C.A. is a Venezuela company owned by Juan M Salas-Romer.

The company is no longer a member of the LLC. Juan
M Salas is the sole member of this LLC since 2005

Dated October 14, 2012


Signature of a member or authorized representative of a member

Juan M Salas-Romer

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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