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N. Guffigan JUN 25 2014

#### **COVER LETTER**

TO:

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Registration Section Division of Corporations

# TEXAS VERTENTE FINANCIAL, 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:

## JOAO HERACLIO DO REGO

Name of Person

## TEXAS VERTENTE FINANCIAL, LLC

Firm/Company

# 2889 MCFARLANE ROAD

Address

# COCONUT GROVE, FL 33133

City/State and Zip Code

RH.RH@GLOBO.COM

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

For further information concerning this matter, please call:

## FRANCISCO R. H. DO REGO

786 616-0005

Name of Person

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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2014 JUN 19 AM 9: 47

SECRETARY OF STATE TALLAMASSEE, FLORIDA

TEXAS VERTENTE FIN	•	•	
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Lie Florida document number L0400049090	ability Company	were filed on <u>06/30/2</u>	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and end with the v	oneda OT imited Tick	ility Company " the decimati	on "IIC" as the abbreviation "IIC"
Enter new principal offices address, if applica	•	2889 MCFARLA	
(Principal office address MUST BE A STREE	( ADDRESS)	COCONUT GR	OVE, FL 33133
Enter new mailing address, if applicable:		2889 MCFARLA	ANE ROAD
(Mailing address MAY BE A POST OFFICE)	3 <i>0X</i> )	COCONUT GR	OVE, FL 33133
B. If amending the registered agent and/or the new registered of			ecords, enter the name of the new
Name of New Registered Agent:	FRANCIS	CO RICARDO HE	ERACLIO DO REGO
New Registered Office Address:	2889 MCF	FARLANE ROAD  Enter Florida stree	address :
	COCONU	T GROVE	, Florida 33133
		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 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> **Type of Action** 110 MERRICK WAY MGR LOUIS STINSON JR □ Add SUITE 3A **■** Remove CORAL GABLES, FL 33134 □ Add □ Remove □ Add □ Add □ Remove □ Add □ Remove □ Add □ Remove

AND BY TEXAS FINAN	NCIAL CORP LOCATED IN G	RAND CAYMAN
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ffective date, if other than the d he effective date must be specific, cannot he date this document is filed by the Flor	t be prior to date of receipt or filed date and o	(optional) annot be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00

