207000046949

(Re	questor's Name)			
	•			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
_				
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
'	· ·			

Office Use Only



200239876862

09/24/12--01038--005 **25.00

SEGRETARY OF STATE
DIVISION OF COMPONATIONS

19 SEP 21. AM IO: 1.7

SEP 2 5 2012

T. HAMPTON

COVER LETTER

Division of C			•
SUBJECT: _	ARGOMAC	HOLDINGS, LLC	
·	Name of Limit	ed Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JOH	IN S. BOHATCH, ESQ.	
		Name of Person	
	GUTTENMACHE	R, BOHATCH & PENARAI	NDA, PA
		Firm/Company	
	7301 SW 57TH COURT, SUITE 560)
		Address	
	SO	UTH MIAMI, FL 33143	
		City/State and Zip Code	
	E-mail address: (to	be used for future annual report notific	ation)
For further information	concerning this matter, please ca	11:	
JOH	IN S. BOHATCH	at (305)	666-1040
Name	of Person	at (305) 6 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

GUTTENMACHER, BOHATCH & PEÑARANDA, P.A.

ATTORNEYS AT LAW

JOHN S. BOHATCH†
EDWARD P. GUTTENMACHER
KATALINA PEÑARANDA
ANDRES E. TEJIDOR*

PRACTICE LIMITED TO PROBATE, ESTATE PLANNING, BUSINESS PLANNING & TAXATION

† FLORIDA CERTIFIED PUBLIC ACCOUNTANT

* LLM. TAXATION

7301 SOUTHWEST 57TH COURT SUITE 560 SOUTH MIAMI, FLORIDA 33143

TELEPHONE (305) 666-1040 TELEFAX (305) 666-1020 E-MAIL LaW@GBPTaxLaw.com KEY WEST OFFICE

GULFVIEW POINTE 2647 GULFVIEW DRIVE KEY WEST, FLORIDA 33040

TELEPHONE (305) 294-1521 TELEFAX (305) 292-4016

PLEASE REPLY TO:

September 18, 2012

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Articles of Amendment

To Whom It May Concern:

Enclosed please find for filing the Articles of Amendment for Argomac Holdings, LLC.

Also enclosed is our Firm's check in the amount of \$25.00 representing the filing fee.

Please file this Amendment and return a date stamped copy to our office in the self-addressed stamped envelope provided herein.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,

GUTTENMACHER, BOHATCH & PEÑARANDA, P.A.

KATALINA PEÑARANDA, ESQ.

KP/lmf Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SEGRETARY OF STATE DIVISION OF CORPORATIONS

12 SEP 24 AM 10: 47

ARGO (Name of the Limited Lia) (A Floi	MAC HOLDINGS, LLC bility Company as it now appears o rida Limited Liability Company)	n our records,)	
The Articles of Organization for this Limited Liabili Florida document number		MAY 2, 2007 and assigned	
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
ARGC	OROD HOLDINGS, LLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	<u> </u>		
(Principal office address MUST BE A STREET AI	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our address here:	records, enter the name of the new	
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 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 **Title** <u>Name</u> **Address Type of Action MGRM** ALEX C. RODRIGUEZ 4961 SW 74TH COURT ☐ Add Remove MIAMI, FL 33155 MGRM MARIA I. RODRIGUEZ 4961 SW 74TH COURT ☐ Add ✓ Remove MIAMI, FL 33155___ MGR ALEX C. RODRIGUEZ 4961 SW 74TH COURT ✓ Add ☐ Remove MIAMI_FL 33155_ MARIA I. RODRIGUEZ MGR 4961 SW 74TH COURT **✓** Add Remove MIAMI, FL 33155 \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **SEPTEMBER** Dated Signature of a member or authorized representative of a member ALEX C. RODRIGUEZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00