Division of Corporations L09000038107

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000237950 3)))

H090002379503ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

2009 NOV -9 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

From:
     Account Name    : WESTON CORPORATE ADMINISTRATION, LLC
     Account Number  : I20090000072
     Phone           : (954)389-0729
     Fax Number      : (954)337-8346
```

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

JOAFINA LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$25.00

RECEIVED
09 NOV 9 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

A. LUNT
NOV 10 2009
EXAMINER

11-09-09;20:01 ;jtrcpapa/9543378346 18506176383 ;9549900881 # 1/ 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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

FILED
2009 NOV 9 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on APRIL 20 2009 and assigned Florida document number L09000038107.

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."

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: WESTON CORPORATE ADMINISTRATION LLC

New Registered Office Address: 2625 WESTON ROAD
(Enter Florida street address)

WESTON, **Florida** 33331
(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.

Jacqueline Rodriguez
(If Changing Registered Agent, Signature of New Registered Agent)

11-09-09;20:01 ;jtrcpapa/9543378346 18506176383 ;9549990081 # 2/ 3

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	Name	Address	Type of Action
MGRM	MARIANO PEREZ IBANEZ	5626 NW 104 CT DORAL, FL 33178 (50% MEMBER)	☑ Add ☐ Remove
MGRM	LEANDRO TRAVAGLIO	5626 NW 104 CT DORAL, FL 33178 (50%MEMBER)	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated 09 NOVEMBER 2009

Signature of a member or authorized representative of a member

MARIANO PEREZ IBANEZ
Typed or printed name of signer

FILED
2009 NOV -9 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-09-09;20:01 ;jtrcpapa/9543378346 18506176383 ;9549900881 # 3/ 3