L09000098354

(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:						
·						

Office Use Only

B. KOHR

APR 6 2011

EXAMINER



300199801323

04/04/11--01060--021 **25.00

11 APR -4 AM 8: 13

SECRETARY OF STATE
THE STATE OF CORPORATIONS

COVER LETTER

TO:	Registration Sect Division of Corpo				
SUBJI	ÉСТ:	EKAL INVE	ESTMENTS LLC		
		Name of Limite	ed Liability Company	<u> </u>	
The en	nclosed Articles of Ar	nendment and fee(s) are subr	nitted for filing.		
Please	return all correspond	lence concerning this matter t	to the following:		ين رُ
			Gustavo Gambino		A PR
			Name of Person		<u></u>
			Firm/Company		1 APR-4 AT 8:
		78	5 Crandon Blvd #201	I	· ·
			Address		
_		Key			
		gus E-mail address: (to	gambino@gmail.con be used for future annual repo	Ort notification)	
For fu	rther information con	cerning this matter, please ca	n:		
	Gusta	vo Gambino	at (_786_)	281-5050 Daytime Telephone Number	
	Name of 1	VI SOII	Aida Couc te	Day une Telephone Pulifice	
Enclos	ed is a check for the	following amount:			
₹ 25	5.00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	nclosed) Certified C	of Status &
	Registrati	G ADDRESS:	Registration		
	P.O. Box	of Corporations 6327 ee, FL 32314	Clifton Buil	Corporations lding tive Center Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 .			
EKAL INVESTI	MENTS LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	v as it now appear ability Company)	rs on our records.)	19 19
(,p,		→ 3
The Articles of Organization for this Limited Liability Company v	were filed on	10/12/2009	and assignad
Florida document number L0900098354			70
This amendment is submitted to amend the following:			()
A. If amending name, enter the new name of the limited liabil	lity company her	<u>'e</u> :	
The new name must be distinguishable and end with the words "Limite"L.L.C."	ed Liability Compa	my," the designation "L	LC" or the abbreviatio
Int.C.			
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		<i></i>	
T			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	/		
B. If amending the registered agent and/or registered offi		our records, <u>enter t</u> l	ie name of the nev
registered agent and/or the new registered office address here			
Name of New Registered Agent:			
No. Designed Office Address			
New Registered Office Address:	Ext	ter Florida street addr	220
		ioi i ioi iuu dii bei uuul	Cub
		, Florida	
	City*		7in 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member <u>Title</u> **Name Address Type of Action** MGRM Eugenio Bori ☐ Add Remove MGR Eugenio Bori 785 Crandon Blvd #201 ✓ Add ☐ Remove Key Biscayne, FL 33149 ☐ Add ☐ Remove Add Remove □Add Remove ∏Ađd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 30 2011 Dated ___ Signature of a member or anthorized representative of a member Alexandre Montagna

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00