

L16000066613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

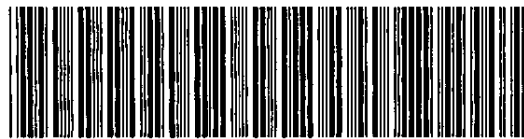
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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AUG -6 2013  
T. HANPTON

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: YACHT LEATHER GOODS 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:

**SUSANA BIJANI**

Name of Person

**JP GLOBAL BUSINESS SOLUTIONS INC**

Firm/Company

**7325 NW 36TH ST**

Address

**MIAMI, FL 33166**

City/State and Zip Code

**JOSE.PEREZ@DANIELAHART.COM**

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

For further information concerning this matter, please call:

**SUSANA BIJANI**

Name of Person

**305 436-0093**

at ( )

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**

YACHT LEATHER GOODS 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 06/22/2010 and assigned  
Florida document number L10000066613.

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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)*

2855 NW 112TH AVE  
SUITE #2  
DORAL, FL 33172

**Enter new mailing address, if applicable:**  
*(Mailing address MAY BE A POST OFFICE BOX)*

2855 NW 112TH AVE  
SUITE #2  
DORAL, FL 33172

**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: JP GLOBAL BUSINESS SOLUTIONS INC  
New Registered Office Address: 7325 NW 36TH ST  
*Enter Florida street address*  
MIAMI, Florida 33166  
*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>
MGR	EUGENIA HINCAPIE	2855 NW 112TH AVE	<input type="checkbox"/> Add
		SUITE #2	<input checked="" type="checkbox"/> Remove
		DORAL, FL 33172	
MGR	CARLOS M. TRUJILLO	2855 NW 112TH AVE	<input type="checkbox"/> Add
		SUITE #2	<input checked="" type="checkbox"/> Remove
		DORAL, FL 33172	
MGR	CARLOS J. TRUJILLO	2855 NW 112TH AVE	<input checked="" type="checkbox"/> Add
		SUITE #2	<input type="checkbox"/> Remove
		DORAL, FL 33172	
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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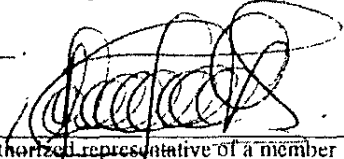
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Dated 07/31/2013



Signature of a member or authorized representative of a member

**EUGENIA HINCAPIE**

Typed or printed name of signer

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