## 612000122819

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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

## Patrimoine USA 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:

Ahpaly Coradin, Esq.

Name of Person

Coradin Law P.A.

Firm/Company

999 Brickell Ave #820

Address

Miami, FL 33131

City/State and Zip Code

ahpaly@coradinlaw.com

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

For further information concerning this matter, please call:

Ahpaly Coradin, Esq.

305 421-1085

Name of Persor

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

(Name of the Limited Liabili	ity Company as it now appears on our re	cords.)
(A Florid	a Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 9-26-2012	and assigned
Florida document number L12000122819		•
<del></del>	<del></del>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Company," the des	ignation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADI	DRESS)	<u> </u>
Enter new mailing address, if applicable:	<u></u>	က် ကြ
(Mailing address MAY BE A POST OFFICE BOX)		
	-	> 0
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		s, enter the name of the new
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida	street address
		lorida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Patrimaina LISA LLC

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>	Address	Type of Action
MGRM	Philippe Charre	370 Rue de la Rolandiere	Add
		Faverges de la Tour 38110	Remove
		France	_
MGRM	Jean-Philippe Mango	370 Rue de la Rolandiere	Add
		Faverges de la Tour 38110	Remove
		France	<del></del>
MGR	Philippe Pepos	299 W. Camino Real #200	Add
		Boca Raton, FL 33432	Remove
		IALLAHASSEE, TLORIDA	Addi
			Remove Add Remove

nending any other information	, enter change(s) here: (Attach additional sheets, if necessary
	<del>.</del>
December 4	, <b>2013</b>
	Josephin .
Signatu	ire of a member or authorized representative of a member
Ahr	oaly Coradin, Esq.
<del> </del>	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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