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Office Use Only



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COVER LETTER

TO: Registration Division of C	Section Torporations						
VERDE SUBJECT:	POSITIVO INTERNATIONAL LLC						
Name of Limited Liability Company							
The enclosed Articles	of Amendment and fee(s) are submitted for filing.						
Please return all corres	spondence concerning this matter to the following:						
	Jason Villalona						
	Name of Person	n					
	MyUSAcorporation.com						
	Firm/Company						
	1 Radisson Plaza, Suite 800						
	Address	<u> </u>					
	New Rochelle, NY, 10801						
City/State and Zip Code agustin@vargasmanriquez.com							
	E-mail address: (to be used for future ar	nnual report notification)					
For further informatio	n concerning this matter, please call:						
Jason Villalona	877 at (3302677					
Nam	ne of Person Area Code	Daytime Telephone Number					
Enclosed is a check fo	or the following amount:						
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Certificate of Status Certified Copy	py Certificate of Status &					

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

FILED

VERDE POSITIVO INTERNATIONAL LLC

2019 APR 23 P 3 80

(Name of the Cimited	Capility Compa	ny na it now appears of iability Company)	tour records.)				
(A	i Florida Limited I	Liability Company)	3E. 1. L.	Ruy of State SSEE. Florida			
		1000	MLLANA Pola	SSEE. FLORIDA			
The Articles of Organization for this Limited Liab	oility Company	were filed on	/201/	and assigned			
Florida document number L17000217893	·						
This amendment is submitted to amend the follow	ving:						
A. If amending name, enter the new name of the limited liability company here:							
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company," the desig	mation "LLC" or th	te abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		15390 SW 20 ST.					
(Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 33185					
							
Enter new mailing address, if applicable:		15390 SW 20 ST.					
(Mailing address MAY BE A POST OFFICE BO	<u>2x)</u>	MIAMI, FL 33185					
B. If amending the registered agent and/or registered agent and/or the new registered office			ar records, <u>ent</u>	ter the name of the new			
Name of New Registered Agent:	ENRIQUE L COLINA						
New Registered Office Address:	15390 SW 20 S		······································				
		Enter Florida	street address				
	MIAMI		, Florida	33185			
		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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
			D Add
			□ Remove
			Change
			D Add
			□ Remove
			□ Change
			⊡ Remove
			Change
			□ Add
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		, , , , , , , , , , , , , , , , , , , 	□ Change
			□ Remove
			☐ Change
		·	□ Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	.0207 (3)(b) ed as the			
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie (b) The 90th day after the record is filed.	er of:			
Dated April 10th 2019				
Signature of a member or authorized representative of a member Agustin Vargas - Authorized Representative Typed or printed transfer of signer.				

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Filing Fee: \$25.00