1060000000417

(Requestor's Name)					
(Address)	_				
((,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
(Address)					
(City/State/Zip/Phone #)	_				
PICK-UP WAIT MAIL					
<u> </u>	_				
(Business Entity Name)					
(Document Number)					
Cartificat Caning Cartificator of Status					
Certified Copies Certificates of Status	-				
Special Instructions to Filing Officer:	7				
	ł				
	١				
	١				
	١				

Office Use Only



200149071152

04/09/09--01015--004 **30.00

FILED

09 APR -9 MIII: 16

SECRETARY OF STATE
TALLAHASSEE, FLEAK

D. BRUCE APR 1 0 2009

EXAMINER

COVER LETTER

Division of Corp			
SUBJECT: Delmar	Sourcing, LLC.		
		ited Liability Company)	
	Amendment and fee(s) are sub	_	
	Martha Prol		
		(Name of Person)	
		(Firm/Company)	
3750 NW 114th Ave Warehouse #6 (Address)			99 ALL SEC
	Doral, Florida 33178		
		(City/State and Zip Code)	To M
For further information co	ncerning this matter, please c	all:	
Martha Prol		at (305) 599-9495	
(Name of	f Person)	(Area Code & Daytime T	'elephone Number')
Enclosed is a check for the	e 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

Delmar Sourcing, 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 $\frac{06/14/2006}{}$ and assigned Florida document number $\frac{L06000060417}{}$.
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 "LLC."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
ASSET
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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:
New Registered Office Address: (Enter Florida street address)
(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>	Name	<u>Address</u>	Type of Action
VP	Rogelio Lucas	8926 NW 178th Lane	Add
		Miami, Florida 33018	Remove
			Remove
			Add Remove
<u></u>			Add Remove
			Add
			☐ Domous
			Add
			======================================
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if nec	essary FC 9
			ARY SSEE
			
Dated April 6	,	2009	
	Signature of a	member or authorized representative of a member	
	Martha Prol	Turned or resisted some of	Without the second seco
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00