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SECHETARY OF STATE DIVISION OF CORPORATIONS

AUG = 6 2013 T. MANAPTON

## COVER LETTER

TO: Registration Section -**Division of Corporations** 

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

 $at \, (\frac{305)436\text{--}0093}{\text{Area Code \& Daytime Telephone Number}}$ 

Name of Person

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 Liab Florida document number <u>L10000066613</u>	ility Company 	were filed on <u>06/22/2010</u>	and assigned SECRET
This amendment is submitted to amend the follow	ing:		FILEU ARY OF CORPC
A. If amending name, enter the new name of the	<u>ie limited liabi</u>	lity company here:	H 1: 19
The new name must be distinguishable and end with t "L.L.C."	he words "Limit	ed Liability Company," the de	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2855 NW 112TH AV	E
		SUITE #2	
		DORAL, FL 33172	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		2855 NW 112TH AV SUITE #2 DORAL, FL 33172	<u>Έ</u>
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:  New Registered Office Address:	e address here	ice address on our recores:  BUSINESS SOLUTION  The start of the start	ONS INC  la street address
	INITALIA II	City	Florida 33166  Zip Code
		7	=4/ 0000

#### 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 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	CARLOS M. TRUJILLO	2855 NW 112TH AVE	
		SUITE #2	Remove
		DORAL, FL 33172	_
MGR	CARLOS J. TRUJILLO	2855 NW 112TH AVE	Add
		SUITE #2	Remove
		DORAL, FL 33172	_
			Add
			Remove
		- Address	
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). If amending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
07/31/2013	870
	Jacob Color
Signature of a r	nember or authorized representative of a member
EUGENIA HINCAPIE	
	Typed or printed name of signee

Page 3 of 3

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