

L13000154431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

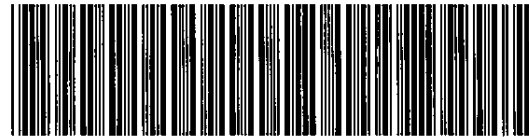
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TALLAHASSEE, FLORIDA

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T. Burch AUG 16 2014



BEHAR LAW GROUP

888 Southeast Third Avenue • Suite # 400 • Fort Lauderdale, Florida 33316
Telephone: 954.524.8888 • Fax: 954.524.0088

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Lea Salama DiMitri, B.B.A., J.D.
lea@eb-5lawyers.com

Tania Marie Sibonney, B.A., J.D.
tania@eb-5lawyers.com

July 24, 2014

Return Receipt Requested

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Yisama International LLC

Ladies and Gentlemen,

Our firm represents the above-captioned in his corporate matters in the State of Florida.

As such, you will find attached the duly executed Articles of Amendment to the Articles of Organization of Yisama International LLC to be filed with the State as soon as possible. Our check in the amount of \$30.00 is also enclosed to cover the processing fees for the registration and a certificate of status.

We look forward to receipt of your correspondence and in the meantime, should you have any questions or concerns, please do not hesitate to communicate with the undersigned.

Yours very sincerely,

BEHAR LAW GROUP

By: Lea Salama DiMitri
Lea A. Salama DiMitri, Attorney

Encl.

cc David Eskenazi (cover and enclosures, via email)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YISAMA INTERNATIONAL 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:

Lea A. Salama DiMitri, Attorney

Name of Person

Behar Law Group

Firm/Company

888 SE Third Avenue, Suite 400

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

lea@eb-5lawyers.com

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

For further information concerning this matter, please call:

Lea S. DiMitri

Name of Person

at 954 524-8888

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**

YISAMA INTERNATIONAL, L.L.C.

(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 November 1st, 2013 and assigned Florida document number L13000154431

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

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:

N/A

New Registered Office Address:

Enter Florida street address

, Florida

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

MGR = Manager
AMBR = Authorized Member

MGR Sandra Klein Eskenazi 7840 NW 50th Street, Suite 207  Add
Lauderhill, FL 33351  Remove

FILED
Remove
JUN -5 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

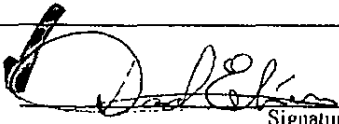
N/A

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____

2014



Signature of a member or authorized representative of a member

David Eskenazi Truzman, Manager

Typed or printed name of signee

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TALLAHASSEE, FLORIDA