F0500000000999

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL .		
(Bu	siness Entity Nar	ne)		
(Document Number)				
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OIVISION OF CORPORATIONS

13 FCB -7 ABIL: 05

Amend AFFidav. +
Changins/A
(10 2/1/13



ACCOUNT NO. : I2	20	00	0	0(0 (1	95
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REFERENCE : 524161 7407640

AUTHORIZATION :

COST LIMIT : \$73

ORDER DATE : February 6, 2013

ORDER TIME : 9:14 AM

ORDER NO. : 524161-005

CUSTOMER NO: 7407640

FOREIGN FILINGS

NAME: NOSTRUM HISPANIC, INC.

XX CORPORATE
LIMITED PARTNERSHIP
LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT#

EXAMINER:

COVER LETTER

то:	Amendment Section Division of Corporations		
SUBJ	ECT: NOSTRUM HISPANIC, INC.		
	Nar	me of Corporation	
DOC	UMENT NUMBER: F05000006999	9	
The e	nclosed Affidavit by Foreign Corporation tted for filing.	to Change/Add Officer(s) and/or Director(s) and	fee are
Please	e return all correspondence concerning this	s matter to the following:	
SHA	RON MASON		<u></u>
	Name of Contact Person		13 FEB -
МсС	ARTER & ENGLISH LLP		١,
	Firm/Company		750e 770e
185	ASYLUM STREET Address		WHII: 05
			45 7
<u>HA</u>	RTFORD, CT 06103 City/State and Zip Code		
	City/State and Zip Code		
	ASON@MCCARTER.COM		
Е	-mail address: (to be used for future annual rep	port notification)	
For fu	rther information concerning this matter, p	please call:	
SHA	ARON MASON at 0	(<u>860</u>) 275-6743	
	Name of Contact Person	Area Code & Daytime Telephone Number	
Enclo	sed is a check made payable to the Florida	Department of State for the following amount:	
	\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations	
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

CR2E127 (10/11)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:

NOSTRUM HISPANIC, INC.	
2. This entity was authorized to transact bus number is F05000006999	siness in Florida on 12/02/2005 and its Florida document
3. This corporation was formed under the la	ws of DELAWARE
4. The name and address of each officer and	
<u>Title:</u>	Name and Address
PD	JUAN DE ANDRES-GAYON WOLFF
	2871 OAK AVENUE
	COCONUT GROVE, FL 33133
CS	JUAN DE ANDRES-GAYON WOLFF
	2871 OAK AVENUE
	COCONUT GROVE, FL 33133
(Attach addit	tional pages if necessary)
K	PRESIDENT
gnature of an officer or director	Title of person signing

JUAN DE ANDRES-GAYON WOLFF

Typed or printed name of person signing

CR2E127 (10/11)

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations PO Box 6327 Tallahassee, FL 32314