

LO2000009488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

CF - 11.25

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

EMPIRE GAVE

AUTHORIZATION BY PHONE TO

CORRECT THE NAME OF LLC

DATE 8/4/03

DOC. EXAM BK

Office Use Only



500021530835

07/29/03--01015--005 \*\*43.75

08/04/03--01001--003 \*\*11.25

RECEIVED  
03 JUL 29 AM 10:32  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

FILED  
03 AUG -1 AM 10:06  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Charter Number Only

VALIDATION ONLY

FILED  
03 AUG - 1 AM 03 06  
TALLAHASSEE, FLORIDA

7/28/03  
Requestor's Name Cast management  
Address 4805 NW 79 Ave #9  
Miami, FL 33166  
City State ZIP Phone

(305) 593-5151 F

CORPORATION(S) NAME

Importadora De Productos de Consumo  
Mundial LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Profit                    | <input checked="" type="checkbox"/> Amendment | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                 |   |   |
| <input type="checkbox"/> Foreign                   | <input type="checkbox"/> Dissolution          | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Annual Report        | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Reservation          | <input type="checkbox"/> Change of Registered Agent |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies         | <input type="checkbox"/> Certificate Under Seal     |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Call If Problem      | <input type="checkbox"/> After 4:30                 |
| <input checked="" type="checkbox"/> Walk In        | <input type="checkbox"/> Will Wait            | <input checked="" type="checkbox"/> Pick Up         |
|  |   | <input type="checkbox"/> Mail Out                   |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

Empire Toll Free: 1-800-432-3028



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 29, 2003

EMPIRE

TALLAHASSEE, FL

SUBJECT: IMPORTADORA DE PRODUTOS DE CONSUMO MUNDIAL LLC  
Ref. Number: L02000009488

FILED  
03 AUG -1 AM 10:06  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

We have received your document for IMPORTADORA DE PRODUTOS DE CONSUMO MUNDIAL LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$43.75 payment.

We are sorry if our fees are confusing, but the amount required to file this LLC amendment is \$25.00, and a certified copy of an LLC amendment is \$30.00.

The total required to file this amendment and to provide a certified copy is \$55.00.

Please send an ADDITIONAL \$11.25 so that your filing can be processed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 603A00043841

ARTICLES OF AMENDMENT  
TO  
THE ARTICLES OF ORGANIZATION FOR IMPORTADORA DE PRODUCTOS DE CONSUMO  
MUNDIAL LLC.

FIRST : ARTICLE 2. ADDRESS  
THE PRINCIPAL PLACE OF BUSINESS OF THE COMPANY IN FLORIDA SHALL BE  
15800 SW 141 COURT MIAMI, FLORIDA 33177 AND THE MAILING ADDRESS SHALL BE THE  
SAME.

ARTICLE 3. EFFECTIVE DATE  
THIS ARTICLES OF AMENDMENT SHALL BE EFFECTIVE IMMEDIATELY.

ARTICLE 6. REGISTERED OFFICE AND REGISTERED AGENT  
REGISTERED AGENT SHALL BE LOUIS F. CAST OF 4805 NW 79 AVENUE SUITE  
# 9 MIAMI, FLORIDA 33166

ARTICLE 9. MANAGEMENT  
THE NEW MANAGERS ARE AS FOLLOWS :  
OPERATING MANAGER : CLAUDIO SCORPO  
PRESIDENT : CLAUDIO SCORPO  
VICE PRESIDENT : CLAUDIO SCORPO  
SECRETARY : CLAUDIO SCORPO  
TREASURER : CLAUDIO SCORPO  
WHOSE ADDRESS SHALL BE THE SAME AS THE PRINCIPAL OFFICES OF THE COMPANY.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS  
FOR THE ABOVE NAMED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED AS  
THE REGISTERED OFFICE 4805 NW 79 AVENUE SUITE # 9 MIAMI, FLORIDA 33166  
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  
RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM  
FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED  
AGENT.

  
\_\_\_\_\_  
LOUIS F. CAST

SECOND : ADOPTION OF AMENDMENTS

THE AMENDMENTS WERE APPROVED BY THE SHAREHOLDERS. THE  
NUMBER OF VOTES CAST FOR THE AMENDMENT WERE SUFFICIENT FOR APPROVAL.

SIGNED THIS 23 DAY OF JUNE 2003

SIGNATURE   
\_\_\_\_\_  
CLAUDIO SCORPO / PRESIDENT

FILED  
03 AUG 1 AM 10:06  
STATE  
MIAMI, FLORIDA