Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number : I20000000082 Phone : (305)871-0889 Fax Number : (305)870-9623

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

NOV 30

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MCL INTERNATIONAL ASSET MANAGEMENT, LLC

Certificate of Status	
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B. BOSTICK

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Corporate Filing Menu

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DEC - 3 2012

EXAMINER

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11/19/2012

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MCL INTERNATIONAL ASSET MANAGEMENT, LLC

(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.)
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L02000012173</u>	n 05/17/2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	ıv here:
The new name must be distinguishable and end with the words "Limited Liability C"L.L.C."	Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	1-3-
· **	28 70
Enter new mailing address, if applicable:	DOV 30
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	Mine .
Name of New Registered Agent: KARLA VILLALOBOS	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

**

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.

5440 W 21TH CT APT 307

HIALEAH

City

Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

33016

Zip Code

Page 1 of 2

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 Type of Action <u>Address</u> Title. <u>Name</u> MGRM CARLOS A LEVAY ☐ Add 273 CORYDON DRIVE ☑ Remove MIAMI SPRINGS, FL 33166 KARLA VILLALOBOS MGRM 5440 W 21TH CT APT 307 **✓** Add Remove HIA) FAH EL 33016 ☐ Add Remove Remove □Add □ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **NOVEMBER 30** 20121 Dated . بي Signature of a member of authorized representative of a member CARLOS A LEVAY Typed or printed name of signed

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Filing Fee: \$25.00