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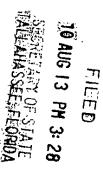
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S. HAWKES
AUG 1 6 2010
EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp	ction porations		
SUBJECT: American	Shrimp, LLC		
		ited Liability Company)	
•			
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Feliberto Batista		
		(Name of Person)	
	American Shrimp, LL		
		(Firm/Company)	
	1659 Coastal Hwy		
		(Address)	
	Panacea, FL 32346		
	·	(City/State and Zip Code)	
For further information co	oncerning this matter, please c	all:	
Feliberti Batista		at (786) 863-0140	
(Name o	f Person)	(Area Code & Daytime	lelephone Number)
,			
Enclosed is a check for th	e 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

American Shrimp, 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 Liability Company were filed on August 24, 2004 Florida document number <u>L0400063130</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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: New Registered Office Address: (Enter Florida street address) (Zip Code) (City) 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 Changing Registered Agent, Signature of New Registered Agent)

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>Title</u> <u>Name</u> **Address** 6470 SW 19 Street **MGRM** Manuel Espejo **✓** Add Remove Miami FL 33155 ☐ Add ☐ Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated August 11 Signature of a member or authorized representative of a member Feliberto Batista

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee