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| (Business Entity Name) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
| Special instructions to Filing Officer. | | | | |
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Office Use Only



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T. HAMPTON

JAN 2 2 2009

EXAMINER

COVER LETTER

| то: | Registration Sec Division of Corp | | | | | | |
|---|--------------------------------------|---|--|---|--|--|--|
| SUBJECT: Le Monde Marketing and Trading, 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: | | | | | | | |
| | | Thomas Baur | | | | | |
| | (Name of Person) | | | | | | |
| | | Baur & Klein, P.A. | | | | | |
| (Firm/Company) | | | | | | | |
| 100 North Biscayne Blvd., Suite 2100 | | | | | | | |
| (Address) | | | | | | | |
| | | Miami, Florida 33132 | | | | | |
| (City/State and Zip Code) | | | | | | | |
| For further information concerning this matter, please call: | | | | | | | |
| Thoma | ıs Baur | | at (305) 377-3561 | | | | |
| (Name of Person) (Area Code & Daytime Telephone Number | | | elephone 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



RECEIVED

09 JAN 21 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 13, 2009

4 , 6

THOMAS BAUR BAUR & KLEIN PA 100 N BISCAYNE BLVD - STE 2100 MIAMI, FL 33132

SUBJECT: LE MONDE MARKETING AND TRADING, LLC

Ref. Number: L04000066512

We have received your document for LE MONDE MARKETING AND TRADING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or manager of the limited liability company.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 009A00001247

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Le Monde Marketing and Trading, LLC | | |
|--|---|---------------------------------------|
| Name of the Limited Liability (A Florida L | Company as it now appears on our reco imited Liability Company) | rds.) |
| The Articles of Organization for this Limited Liability Co | ompany were filed on 09/10/2004 | and assigned |
| Florida document number L04000066512 | _• | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limit | ed liability company here: | |
| The new name must be distinguishable and end with the word "L.L.C." | ls "Limited Liability Company," the design | nation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | ᅙ |
| (Principal office address MUST BE A STREET ADDRE | ESS) | VISIO |
| | | ON ON |
| | | FCO FOR |
| Enter new mailing address, if applicable: | | ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ ₹ |
| (Mailing address MAY BE A POST OFFICE BOX) | | P A RA |
| | | 58 10x |
| B. If amending the registered agent and/or registered agent and/or the new registered office addresses | | enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | (Enter Florida s | treet address) |
| | | rida |
| | (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 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 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 <u>Title</u> **Address Type of Action** <u>Name</u> MGRM Detlef Gohlke 100 N. Biscavne Blvd., Suite 2100 ■ Add Miami, Florida 33132 Remove Joachim Wander MGRM 100 N. Biscayane Blvd., Suite 2100 **∓** Add ■ 🗸 Remove Miami, Florida 33132 MGRM Matthias Weichert ∎Ø Add 100 N. Biscavne Blvd., Suite 2100 Miami, Florida 33132 Remove Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member **Thomas Baur**

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee