12500078196

(Rec	questor's Name)			
(Add	lress)			
(Add	lress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer	3M		
Dome of				





700081534167

11/13/06--01015--015 **55.00

O6 NOV 13 PH 1:59
SECRETARY OF STATE

· COVER LETTER

Division of Corporations
SUBJECT: International Product Marketing, 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:
Steven Schmutter (Name of Person)
International Product Marketing, LLC. (Firm/Company)
10800 Biscayne Blvd. Suite 770 (Address)
Miami, Florida 33161 (City/State and Zip Code)
For further information concerning this matter, please call:
Jose Delgado at (305) 892-2800 (Area Code & Daytime Telephone 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, Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations

TO:

Registration Section

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

_	International Product Marketing, LLC. (Present Name) (A Florida Limited Liability Company)		
	(A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on <u>August 9th, 2005,8:00 am</u> and assigned document number <u>L05000078196</u> .		
SECOND:	This amendment is submitted to amend the following:		
	Remove :		
	_Title: MGRM		
	ABRAHAM CHEHEBAR		
	LEC A	VON 9	= = = = = = = = = = = = = = = = = = = =
	HASS		<u>anten</u>
	U° NY	B PH	
	Dm A		(E)
	^		
Dated	November 07 , 2006 .		
	\mathcal{L}		
	Signature of a member Authorized representative of a member		
	Typed or printed name of signee	_	

Filing Fee: \$25.00