

LOS0000 111407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800067579698

03/14/06--01018--002 \*\*25.00

06 APR 17 PM 4:02  
SECURITY SALE  
TALL MOUNTAIN

FILED

LOS-111407  
QR



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2006

GUILLERMO TORRES  
8200 NW 52 TER., SUITE 104  
DORAL, FL 33166

SUBJECT: CV INVESTMENTS USA, LLC.  
Ref. Number: L05000111407

We have received your document for CV INVESTMENTS USA, 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 contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 206A00018074

06 APR 17 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: CV INVESTMENTS USA, 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:

GUILLERMO J. TORRES

(Name of Person)

CV INVESTMENTS USA, LLC

(Firm/Company)

8200 NW 52 TER. - STE. 104

(Address)

DORAL, FL. 33166

(City/State and Zip Code)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 APR 17 PM 4:02

FILED

For further information concerning this matter, please call:

GUILLERMO J. TORRES

(Name of Person)

at ( 305 ) 303 5085

(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,  
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

CV INVESTMENTS USA, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 11/17/05 and assigned  
document number L05000111407.

**SECOND:** This amendment is submitted to amend the following:

ARTICLE II - New Address:

8200 NW 52nd Ter. - Ste. 104 Doral, FL 33166

ARTICLE III - New Registered Agent

Cabanas & Associates, P.A.-

10520 NW 26 St.- Ste C 201, Doral, FL 33172

ARTICLE IV-Management

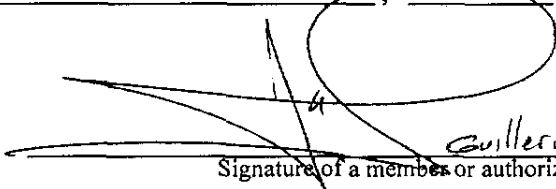
Delete: Carlos Velasco as Mgr, and Nerio Chacon as Mgr

ADD: Guillermo J. Torres, Mgr. and Marggi K. Torres, Mgr.

Address: 8200 NW 52nd Ter. -Ste 104, Doral, FL 33166

Please Incorporate Fed ID #: 20-3812322

Dated March 8, 2006



Signature of a member or authorized representative of a member

Guillermo J. Torres

Typed or printed name of signee

Filing Fee: \$25.00

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED  
OFFICE/MEMBER/REPRESENTATIVE

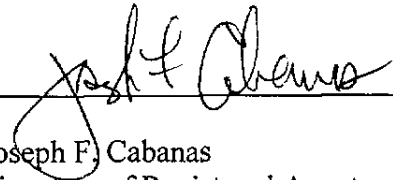
CV INVESTMENTS USA, LLC

\_\_\_\_\_  
(Name of Company)

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the Articles of Organization, 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.

CABANAS & ASSOCIATES, P.A.

\_\_\_\_\_  
Registered Agent

  
\_\_\_\_\_  
Joseph F. Cabanas  
Signature of Registered Agent

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 APR 17 PM 4:02

FILED