

# LO50000111696

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

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Account Number : I20100000009  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOUCHE USA, LLC

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

TOUCHE USA, 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 November 17, 2005 and assigned  
Florida document number L05000111696.

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."

Enter new principal offices address, if applicable:

6901 Okeechobee Blvd. #D5 - M7

(Principal office address MUST BE A STREET ADDRESS)

West Palm Beach, FL 33411

Enter new mailing address, if applicable:

6901 Okeechobee Blvd. #D5 - M7

(Mailing address MAY BE A POST OFFICE BOX)

West Palm Beach, FL 33411

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:

Jose A Torres

New Registered Office Address:

10305 NW 41st Street, Suite 116

Enter Florida street address

Doral

City

Florida

33178

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>     | <u>Address</u>             | <u>Type of Action</u>                      |
|--------------|-----------------|----------------------------|--------------------------------------------|
| MGR          | Sebastian Isaza | 800 Ocean Drive, Suite 101 | <input type="checkbox"/> Add               |
|              |                 | Miami Beach, FL 33139      | <input checked="" type="checkbox"/> Remove |
|              |                 |                            |                                            |
|              |                 |                            | <input type="checkbox"/> Add               |
|              |                 |                            | <input type="checkbox"/> Remove            |
|              |                 |                            |                                            |
|              |                 |                            | <input type="checkbox"/> Add               |
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|              |                 |                            | <input type="checkbox"/> Add               |
|              |                 |                            | <input type="checkbox"/> Remove            |
|              |                 |                            |                                            |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 2, 2014



Signature of member or authorized representative of a member

Maria Cecilia Arango

Typed or printed name of signer