## 106000011587

(Req	uestor's Name)	
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(City.	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Doc	ument Number)	
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THE SECRETARY OF STATE

T. CLINE

AUG 2 7 2008

EXAMINER



August 13; 2008

JOSE R. SEGUIAS 1010 GOLDEN CANE DR WESTON, FL 33327

SUBJECT: UNICA DE SUMINISTROS, L.L.C.

Ref. Number: L06000011587

We have received your document for UNICA DE SUMINISTROS, L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

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 Regulatory Specialist II Letter Number: 808A000458745

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: UNICA I	DE SUMINISTROS (Name of Limi	LLC ted Liability Company)	<b>=</b>
	mendment and fee(s) are subtence concerning this matter to		
	JOSE R. SEGUIAS	(Name of Person)	
	UNICA DE SUMINISTRO		
	### !	(Firm/Company)	alaura dan aurila den den aplicio de de Anglago de Angl
	1010 GOLDEN CANE DR	R (Address)	14
	WESTON FLORIDA 3332	27 (City/State and Zip Code)	<del></del>
For further information co	ncerning this matter, please ca		
JOSE R. SEGUIAS		at ( 754 ) 2468699	
(Name of	Person)	(Area Code & Daytime T	elephone Number) SSEE. FLOT STATES
Enclosed is a check for the	following amount:		OR 72: 3
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Registra	NG ADDRESS: tion Section of Corporations x 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNICA DE SUMINISTROS LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as <mark>it now appears on our record</mark> Liability Company)	<u>(s.</u> )		
The Articles of Organization for this Limited Liability Company	were filed on L06000011587	and assigned		
Florida document number FEBRERO, 01 2006				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limit".L.L.C."	ited Liability Company," the designa	tion "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	1010 GOLDEN CANE DR	द्धः, क् <u>र</u>		
(Principal office address MUST BE A STREET ADDRESS)	WESTON FLORIDA 33327	FO S -m		
	Name to the state of the state	#55 6 FT		
		SERVICE TO THE		
Enter new mailing address, if applicable:	1010 GOLDEN CANE DR			
(Mailing address MAY BE A POST OFFICE BOX)	WESTON FLORIDA 33327	. C		
		om 1		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		nter the name of the nev		
Name of New Registered Agent:				
New Registered Office Address:				
	(Enter Florida street address)			
	, Flori			
	(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:

	<u>Name</u>	Address	Ty	pe of Act	ion
her describe				Add Remove	
				Add Remove	
				Add Remove	
<del></del> -	<u> </u>			Add Remove	
				Add Remove	
				Add Remove	
amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary, so of the principal office of Limited Liability Compa	) III IS		,
	RTICLE II: The Street and mailing Address 110 GOLDEN CANE DR. WESTON, FLOR		VARY OF STAT ASSEE, FLOR	3900 AUG 26 PH 12: 37	A SECTION OF THE SECT
AUG	SUST 25 , 2008	V wind-	Dm >-	37	
	Signature of a member	For authorized representative of a member			

Page 2 of 2

Filing Fee: \$25.00