L06000029400

(F	Requestor's Name	e)	
(/	Address)		
(/	Address)		
(0	Dity/State/Zip/Pho	ne #)	
PICK-UP	☐ WAIT	MAIL	
(E	Business Entity N	ame)	
(Document Number)			
Certified Copies	Certificat	es of Status	
Special Instructions t	o Filing Officer:		
		,	
		:	

Office Use Only



700236591327

06/21/12--01007--019 **25.00

2012 JUN 21 AM 10: 30
SECRETARY OF STATE

ne 6/25/12

COVER LETTER

SUBJECT:		ERNATIONAL LLO	D		
	Name of Limit	ed Liability Company			
The enclosed Articles of Am	endment and fee(s) are sub-	mitted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
•	S	-			
	JI,	JANA HERNANDEZ			
-		Name of Person		.	
·			•		
-		Firm/Company		_	
	20725 N	IE 16 AVENUE, UNIT	A-16		
-		Address		***	
		MIAMI, FL 33179			
-	City/State and Zip Code				
_	E-mail address: (t	o be used for future annual repor	rt notification)		
For further information concerning this matter, please call:					
ΠΙΔΝΙΔ	HERNANEZ	at (_305)	653-6085		
Name of Pe		at (at (Daytime Telephone Number	er	
Carlaged is a shoot for the f	allausina amayıntı				
Enclosed is a check for the fo			— •••••	•••	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certifie	iling Fee, sate of Status & scd Copy snal copy is enclosed)	
	NADDRECC.	OTDDDD (C	OUDIED ADDRESS.		

Registration Section Division of Corporations

TO:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2012 JUN 21 AM 10: 30

MOLHER MOLHER	INTERNATIONAL L	LC SECRET	ARYGEORG
MOLHER (<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appear Limited Liability Company)	s on our records HA	SSEE. FLORIDA
The Articles of Organization for this Limited Liability Florida document number L06000029400	Company were filed on	03/21/2006	and assigned
This amendment is submitted to amend the following:	,		
A. If amending name, enter the new name of the lir	nited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	ny," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regirestered agent and/or the new registered office ad			the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Cim	, Florida	Zip Code
	City		zip Coae

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 Changing Registered Agent, Signature of New Registered Agent

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> Fitle</u>	<u>Name</u>	Address	Type of Action
MGRM	HERNANDEZ, GUILLERN	20725 N E 16 AVE UNIT A-16 MIAMI, FL 33179	Remove
			Add Remove
			Domouo
· · · · · · · · · · · · · · · · · · ·			= -
			AddRemove
		-	Remove
D. If amen	ding any other information, enter o	hange(s) here: (Attach additional shee	ets, if necessary.)
Dated	MAY 29 , .	2012	
	Signature of a m	ember or authorized representative of a me	mber .
		JUANA HERNANDEZ	
	-	vned or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00