

# 206000089645

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ME CORPORATE SERVICES INTL  
Account Number : I20110000034  
Phone : (305)856-6121  
Fax Number : (305)856-6122

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
UB ECUADOR HOLDINGS, LLC**

Certificate of Status	0
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Corporate Filing Menu

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JUL 18 2014  
D. BRUCE

FILED

2014 JUL 17 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**UB ECUADOR HOLDINGS, 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 09/13/2006 and assigned  
Florida document number L06000089645.

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:**

15807 BISCAYNE BLVD, STE 113

**(Principal office address MUST BE A STREET ADDRESS)**

NORTH MIAMI BEACH, FL 33160

**Enter new mailing address, if applicable:**

15807 BISCAYNE BLVD, STE 113

**(Mailing address MAY BE A POST OFFICE BOX)**

NORTH MIAMI BEACH, FL 33160

**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:**

MF CORPORATE SERVICES INTERNATIONAL

**New Registered Office Address:**

1541 BRICKELL AVENUE- SUITE 1806

Enter Florida street address

MIAMI

City

, Florida 33129

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.*

*[Signature]*  
If Changing Registered Agent, Signature of New Registered Agent



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

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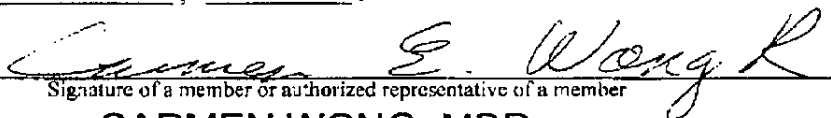
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(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 6, 2014.



Signature of a member or authorized representative of a member

**CARMEN WONG, MBR**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

**FILED**  
2014 JUL 17 PM 12:00  
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