

107000056228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

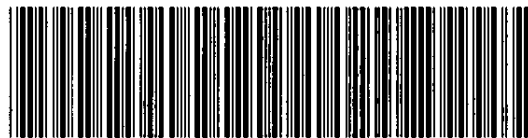
(Document Number)

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2009 SEP 14 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

SEP 15 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INVERSIONES BRAITOVEN, 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:

HAYDEE CEBALLOS, CPA
(Name of Person)

SUAREZ CEBALLOS ORTIZ & VEGA
(Firm/Company)

354 SEVILLA AVENUE
(Address)

CORAL GABLES, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

HAYDEE CEBALLOS at (305) 448-5255
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

INVERSIONES BRAITOVEN, 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 05/25/2007 and assigned Florida document number L07000056228.

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:

(Principal office address MUST BE A STREET ADDRESS)

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Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

(Enter Florida street address)

Florida

(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 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

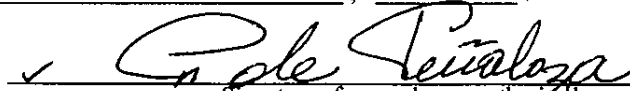
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	SUSANA PENALOZA	RES. HATO VIEJO C MANZANARES PISO 2 APT 2 COL TAMANACO CARACAS VENEZUELA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JUAN P PENALOZA SALAZAR	RES. HATO VIEJO C MANZANARES PISO 2 APT 2 COL TAMANACO CARACAS VENEZUELA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JUAN C PENALOZA SALAZAR	RES. HATO VIEJO C MANZANARES PISO 2 APT 2 COL TAMANACO CARACAS VENEZUELA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	NELSON GUILLERMO COLINA	CALLE JUREL QUINTA LUCHI VERB PLAYA EL ANGEL PAMPATAR-ISLA MARGARITA ESTADO NUEVA ESPATA VENEZUELA	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	IVETTE G DE COLINA	CALLE JUREL QUINTA LUCHI VERB PLAYA EL ANGEL PAMPATAR-ISLA MARGARITA ESTADO NUEVA ESPATA VENEZUELA	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated APRIL 21, 2009


Signature of a member or authorized representative of a member
CARMEN SALAZAR DE PENALOZA
Typed or printed name of signee