L07000068918

(Req	uestor's Name)			
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(City/	State/Zip/Phon	e #)		
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DIVISION OF CORPORATIONS

OF JUL 16 PM 4: 09

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: LE	OMAR EXPORTS	SLLC		
SOBJECT.	(Name of Li	mited Liability Company)	And the state of t	
	Amendment and fee(s) are su	•		
	DELFINO	ROJAS		
		(Name of Person)		
LEOMAR EXPORTS LLC				
_		(Firm/Company)	7 JU	
	2592 GAF	RDEN CT	OF STATE	
		(Address)	P	
	COOOPE	R CITY, FL 33026	. 30	
		City/State and Zip Code)	OT JUL 16 PH 4: 09	
For further information of	concerning this matter, please	call:		
DELFINO ROJAS at (954) 435-1455 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name	of Person)	(Area Code & Daytim	ne Telephone Number)	
Enclosed is a check for the	following amount:			
图 \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS.		etrett/court	ER 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

LEOMAR EXPORTS LLC

(Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Orga document number _	Anization were filed on L07000068918	and assigned	
SECOND		submitted to amend the following:	LLC TO:	
		CHANGE LEOMAR EXPORTS TERNATIONAL IMPORT/EXPO		_
	Plance	$M_{\rm col} = M_{\rm col} = M_{\rm col}$		_
	authoris	ted representative.	THIR	DIVISIO
	Plao ch	range Phone # To: 95	4-433-1604	SION OF CORPORATIONS SION OF CORPORATIONS JUL 16 PH 4: 09
	Paria	Kojas 7///g/es)	PH 4:
	STORT - PARL - MA	· · · · · · · · · · · · · · · · · · ·		09 CHS
Dated J	uly 11			
		Topfi		· ·
		Signature of a member or authorized representative	Rojas	_
		Typed or printed name of signee	-1	

Filing Fee: \$25.00