Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HISPANUSA INC

Account Number : I20070000099

Phone

: (954)478-2706

Fax Number

: (954)934-0334

**Enter the email address for this business entity to be used for function

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INVESIONES TEUSAQUILLO LLC

> 0 Certificate of Status 0 Certified Copy 01 Page Count \$25.00 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESIONES TEUSAQUILLO LLC

(A Fl	orida Limited Li	ability Company)	<u>n our records.</u>)			
The Articles of Organization for this Limited Liabs Florida document number	• • •	were filed on	09/07/2007	and ssigned		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:						
INVERSIONES TEUSAQUILLO LLC						
The new name must be distinguishable and end with the "L.L.C."	he words "Limite	ed Liability Company,	" the designation "	LEC" or the abbreviation		
Enter new principal offices address, if applicable	le:					
(Principal office address MUST BE A STREET ADDRES		1919 NORTH S	TATE ROAD	7 STE 201C		
		MARGATE, FL	33063			
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BC	<u>)X)</u>					
B. If amending the registered agent and/or registered agent and/or the new registered office			records, enter	the name of the new		
Name of New Registered Agent:	LUIS FERNANDO MAHECHA					
New Registered Office Address:	New Registered Office Address: 1919 NORTH STATE ROAD 7 STE 201C					
2,222	Enter Florida street address					
	- M	ARGATE	, Florida _	33063		
•		Citv		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 softress, I hereby confirm that the limited liability company has been notified in writing of this change.

If Chinging Registered Agent, Signature of New Registered Agent

MGR = Manager

If affiending 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:

MGRM =	= Managing Member		
<u>Title</u>	Name	<u>Address</u>	Type Action
MGRM	LUIS F. MAHECHA	1919 NORTH STATE ROAD 7 SUITE 201A MARGATE, FL 33063	NOVA-ROPA
<u>MGRM</u>	YISSEL P. MAHECHA	1919 NORTH STATE ROAD 7 SUITE 201A MARGATE, FL 33063	AME REMOVE
MGRM	HERNAN M. MAHECHA	CARRERA 56 #13-31 PUENTE ARANDA, BOGOTA	
<u>MGRM</u>	JOSE J. DIAZ	3826 NE 23RD PLACE CAPE CORAL, FL 33909	Add Remove
			Add Remove
			Add
	ending any other information, enter char	nge(s) here: (Attach additional sheets, if necess	sary.)
		S LIMITED LIABILITY CO. IS ORGANIA	ZED IS:
•		ERCILIZATION OF ORGANIC PRODUC	•
	AND ANY AND ALL LAWFUL BUS	SINESS.	
Dated	Lui	2010 ber or authorized representative of a member	·····
	duis Tell	nando Maherha	

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Filing Fee: \$25.00