L08000015039

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EXAMINER



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ACCOUNT NO. : 072100000032 REFERENCE : AUTHORIZATION COST LIMIT ORDER DATE: September 4, 2008 ORDER TIME : 12:53 PM ORDER NO. : 710005-005 CUSTOMER NO: 7361995 DOMESTIC AMENDMENT FILING NAME: ARETE USA, LLC EFFECTIVE DATE: XX ARTICLES OF AMENDMENT ____ RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER'S INITIALS:

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

MITOBLE	TO	•
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ARTICLES O	F ORGANIZATIO	on our records.)
	OF	
		3 5 6 6
ARETE USA, LLC		· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears	on our records.)
(A Florida Lim	iited Liability Company)	Ost U
The Articles of Organization for this Limited Lightlity Com	nany wara filad on Febru	
The Articles of Organization for this Limited Liability Com	tpany were med on 1. 55.5	and assigned
Florida document number L08000015039		A.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	
	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	ed office address on ou	r records, enter the name of the new
registered agent and/or the new registered office addres		
Name of Nam Registered Acous		
Name of New Registered Agent:		
New Registered Office Address:		
· · · · · · · · · · · · · · · · · · ·	(Ente	er Florida street address)
		Planta.
	(City)	, Florida(Zip Code)
	(0.1.3)	(Zif) Civile)

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 Title Title **Address Type of Action** <u>Name</u> MGR Luz Elena Isaza 2 Alhambra Plaza Suite 801_____ _____ Remove Coral Gables, Florida 33134 ☐ Remove Remove _ Add ____ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

Angel M. Garcia-Oliver

Dated September 3

2008

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00