

## Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number :

: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

AREAS USA IND, LLC

Certificate of Status	0
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ECRETARY OF STATE LLAHASSEE, FLORIDA

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T. HAMPTON

MAY 1 9 2008

**EXAMINER** 

5/16/08 3:56 PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF  AREAS USA IND, 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 03/18/2008  and assigns Florida document number L08000027879	FILED			
Program document names				
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 abbr	viation			
"L.L.C."				
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
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 registered agent and/or the new registered office address here:	e new			
Name of New Registered Agent: Corporate Creations Network Inc.	Corporate Creations Network Inc.			
New Registered Office Address: 11380 Prosperity Farms Road #221E				
(Enter Florida street address)				
Palm Beach Gardens , Florida 33410				
(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 ugree to comply a the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position us registered agent as provided for in Chapter 608. F.S. Or, if this document 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.  Taide Baez, Vice President	and			
(If Charging Registered Agent, Stenature of New Registered Agent)				

MGRM -	anager Managing Member		
Title	Name	Address	Type of Action
MORM	Areas USA, Inc.	530) Blue Learnin Driver Suite 890 Minmi, FL 33126	Add
CBO &			<del></del>
Manager	Xavler Rabell	5301 Blue Laggon Drive, Sulle 690	
Vice Pres Buainese	ident	/ Miani Fl. 33126	Remove
	nt Eduardo Uribe	5301 Shie Laggon Drive, Sulla 590 Minni, Ft. 33126	n Add Remmo
Vice Pres	sident		<del></del>
Finance	Francesco Вајјј	A301 Blue Lagoon Drive, Suite 690 Marti, FL 83126	Add Remove
			Add
D. Ifamendi	ing any other information, ente	r change(s) here: (Attoch additional sheets, if necessar	y.)
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<del>-</del>			FILE I  08 MAY 16 /  SECRETARY OF TALLAHASSEE.
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Dated>	-/16/2008	Highber or suborted representative of a member	AM 10: 00 F STATE FLORIDA
	Standard of the	recorder or surherized representative of a member	- <del></del>

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