

L08000009321do

Florida Department of State  
Division of Corporations  
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L. SELLERS

OCT - 3 2008

To: Division of Corporations  
Fax Number : (850) 617-6383

EXAMINER

From: Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305) 444-4994  
Fax Number : (305) 444-4977

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

A AND E INTERNATIONAL SERVICES LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$25.00 |

RECEIVED

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

A AND E INTERNATIONAL SERVICES 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 OCT. 01, 2008 and assigned  
Florida document number L08000093266.

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

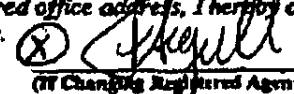
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: FRANCISCO J. ARGUELLES  
New Registered Office Address: 201 CROSS STREET  
*(Enter Florida street address)*  
MIAMI SPRINGS, Florida 33166  
*(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)*

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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: (((H08000228569)))

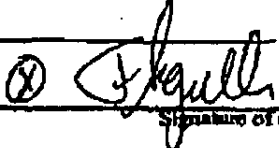
MGR = Manager  
MGRM = Managing Member

| <u>Title</u> | <u>Name</u>       | <u>Address</u>                              | <u>Type of Action</u>  |
|--------------|-------------------|---|--|
| MGR          | EDGAR A. CARDONA  | 6595 NW 36 STREET #320-A<br>MIAMI, FL 33166 | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGR          | ALEJANDRO CARDONA | 6595 NW 36 STREET #320-A<br>MIAMI, FL 33166 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| MGR          | EDGAR CHARDON     | 6595 NW 36 STREET #320-A<br>MIAMI, FL 33166 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                   |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated OCT 02, 2008



Signature of a member or authorized representative of a member

FRANCISCO J. ARGUELLES  
Typed or printed name of signee

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