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(Business Entity Name)

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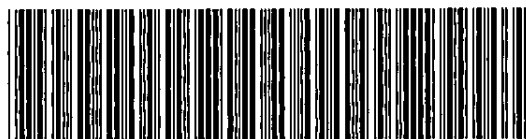
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JUN 20 2013

A. LUNT

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TALLAHASSEE, FLORIDA

13 JUN 20 PM 2:26

FILED
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TALLAHASSEE, FLORIDA

13 JUN 20 PM 2:31

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERINODE LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GUILHERME VILAS BOAS

Name of Person

AMERINODE LLC

Firm/Company

5101 NW 79th AVE. BAY#3

Address

DORAL, FL 33166

City/State and Zip Code

gil.boas@amerinode.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Guilherme Vilas Boas at (305) 282 9579

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING 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

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19 JUN 20 PM 2:31
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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

AMERINODE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number _____.

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

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

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	GUILHERME VILAS BOAS	5101 NW 79th Ave.	<input checked="" type="checkbox"/> Add
		BAY #3	<input type="checkbox"/> Remove
		DORAL, FL 33166	
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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This Articles of Amendment to Articles of Organization of Amerinode LLC adopts the following:

FIRST: An Assignment of Membership Interest was privately executed by and between Guilherme Vilas Boas and Katherine Margaret Cooley where Katherine M. Cooley sold, transferred and assigned her entire

Dated

06/20/2013

Signature of member or authorized representative of a member

GUILHERME VILAS BOAS

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

membership interest to Guilherme Vilas Boas. Such Assignment is set forth as an attachment to this document.

SECOND: As of today, June 20th 2013, I hereby declare that I, Guilherme Vilas Boas, is 100% (one hundred) owner of Amerinode LLC. Guilherme Vilas Boas holds 100% (one hundred) of Amerinode LLC membership interest and is the only Managing Member of Amerinode LLC.

ASSIGNMENT OF MEMBERSHIP INTEREST

FOR AND IN CONSIDERATION OF TEN DOLLARS (\$10.00) AND OTHER GOOD AND VALUABLE CONSIDERATION, THE RECEIPT AND ADEQUACY OF WHICH IS HEREBY ACKNOWLEDGED, the undersigned, KATHERINE M. COOLEY ("Assignor"), owner of one hundred percent (100%) membership interest in NETWORK UNO LLC, a Florida limited liability company (the "Company"), does hereby sell, transfer, and assign her entire membership interest as follows:

Assignee
Guilherme Vilas Boas

Membership Interest
100%

free from any charge, encumbrance or any other right in favor of any party and does hereby irrevocably constitute and appoint any manager or officer of the Company as attorney in-fact to transfer said membership interests on the books and records of the Company.

DATED AS OF JANUARY 1, 2009



KATHERINE M. COOLEY, Assignor

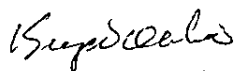


GUILHERME VILAS BOAS, Assignee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sworn to and subscribed before me this
12th day of Nov 2012

(official seal)



Notary Public:

My commission expires April 01 2016

