## L09000024888

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(City/State/Zip/Phone #)		
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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SECHETARY OF STATE TALEARINA

N. Gration NOV 1 9 2015

## • COVER LETTER ==

T <sub>i</sub> O:	Registration Sec Division of Corp	ction porations		
SHBIE	_	VERSEAS LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The encl	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
		JAN A. YELEN		
			Name of Person	
		YELEN & YELEN PA		
			Firm/Company	
		1104 Ponce de Leon Boule	evard	
			Address	
		Coral Gables, Florida 3313	34	
			City/State and Zip Code	
		jyelen@yelen-yelen.com		
		E-mail address: (1	to be used for future annual report notifica	tion)
For furth	ner information co	ncerning this matter, please ca	all:	
Jan A. Y	Yelen		305 445-3721 at ()	
	Name of	Person	Area Code Daytime Te	elephone Number
Enclosed	d is a check for the	e following amount:		
ப் 1\$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

FILED

<del>- 120</del>

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2015 NOV 18 AM 10: 38

SECHETARY OF STATE TALLAHMSSEE, FLORIDA

NANDO OVERSEAS LLC		
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	ty Company were filed on March 12, 2009	and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words "	'Limited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	·
(Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or registered agent and/or the new registered office:		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	ida
	City	ыр Coae

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	NANDO OVERSEAS CORP.	Wickmans Cay, P.O. Box 985	
		Road Town To VG 112-0 BV	■ Remove
			Change
MGRM LUZEEN OVERSEAS LTD.	LUZEEN OVERSEAS LTD.	Pasca Estate	■ Add
		Road Town, Tortola, BV	Remove
			Change
			Add
			☐ Remove
		VOLUME TO THE PROPERTY OF THE	Change
VALUE			Add
			☐ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change

, ,	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_	
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Note:	tive date, if other than the date of filing:	605.0207 (3)( listed as the	(b)
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	rlier of:	
Dated	October 30th 2015		
	W& To		
	Signature of a member or authorized representative of a member	•	
	Mileibi Vega		

Page 3 of 3

Filing Fee: \$25.00