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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NUEVA COMPAÑIA DEL SUR, L.L.C.**

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EXAMINER

EMPIRE CORP.

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12/21/2012 09:09

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NUEVA COMPAÑIA DEL SUR LLC

(Name of the Limited Liability Company as it may appear on our records)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/14/2009

Florida document number: LC9000047057

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 "LLC"

Enter new principal office 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:

City

Florida

Zip Code

New Registered Agent's Signature: _____ _____ _____
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:

MGR = Manager
MCRM = Managing Member

Title	Name	Address	Type of Action
MGR	ROSARIO BEATRIZ CIARALLO	19300 WEST DIXIE HWY	☒ Add
		STE 4	☐ Remove
		AVENTURA FL, 33180	
MGR	JORGE D. GRISPO	19300 WEST DIXIE HWY	☐ Add
		STE 4	☒ Remove
		NORTH MIAMI FL, 33180	
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

Dated DECEMBER 18 2012

Signature of a member or authorized representative of a member

JORGE D. GRISPO

Typed or printed name of signer

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