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12 JUL 30 PH 4: O4

B. BOSTICK
'JUL **3 1** 2012

**EXAMINER** 

## **COVER LETTER**

P.O. Box 6327 Tallahassee, FL 32314

TO:	Registration Se Division of Cor						
SURIE	Ст•	AMERICAN BR	AND SOLUTION L	.LC			
	Name of Limited Liability Company						
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please r	eturn all correspo	ondence concerning this matter	to the following:				
	ALICIA RAMIREZ				_		
			Name of Person				
		AMERIC	AN BRAND SOLUTIO	N LLC	_		
	Firm/Company						
1109 ALEXANDER BEND				_			
			Address				
WESTON, FL 33327							
	City/State and Zip Code  ALICIARION@GMAIL.COM				<b>5</b> 7		
		E-mail address: (	to be used for future annual repo	rt notification)		12	
For fur	her information of	concerning this matter, please of	eall:		has:	2 JUL 30	140-11 140-11
	ALIC	CIA RAMIREZ	at (_954_)	305-1127	ign -	~ □	The second secon
_	Name o	of Person	Area Code & I	Daytime Telephone Numb	ar Town	PH 1: 01	
		the following amount:					
<b>₹</b> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certific	iling Fee, cate of State ed Copy onal copy is		osed)
	Regist Divisi	ING ADDRESS: ration Section on of Corporations dox 6327	Registration	Corporations			

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN BRAND  (Name of the Limited Liability Company (A Florida Limited Liability)	SOLUTION I y as it now appears ability Company)	LC on our records.)	<del></del>	
The Articles of Organization for this Limited Liability Company v	vere filed on	08/19/2009	and assigned	
Florida document numberL09000079969				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company	," the designation "LI	C" or the abbreviation	
Enter new principal offices address, if applicable:	<u></u>			
(Principal office address MUST BE A STREET ADDRESS)		۶۵ز 	ñ 73	
			= "1.	
		ኔ፡ ሆ ሆ	(a) #*	
Enter new mailing address, if applicable:		i de	-D :	
(Mailing address MAY BE A POST OFFICE BOX)				
			<u> </u>	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		r records, enter th	e name of the new	
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 Title <u>Name</u> **Address** Type of Action JUAN CARLOS MANCHON MGRM \_\_ Add \_ Remove 1109 ALEXANDER BEND WESTON FL 33327 Remove ☐ Add \_ Remove Add Remove \_\_\_Add \_\_\_Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member ALICIA RAMIREZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00