L09000 111883

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COVER LETTER

TO: Registration Section Division of Corporations

South America Food 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:

Nelson Slosbergas, Esq.

Nelson Slosbergas, P.A.

Firm/Company

1110 Brickell Avenue, Suite 310

Address

Miami, Florida 33131

City/State and Zip Code

steven@miami-intl-law.com

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

For further information concerning this matter, please call:

Nelson Slosbergas, Esq.

at (305) 374-0030

Enclosed is a check for the following amount:

Name of Person

■ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limite</u>	d Liability Compa A Florida Limited	ny as it now appears on our Liability Company)	r records.)			
The Articles of Organization for this Limited Florida document number <u>L09000111883</u>	Liability Company			and assi	gned	
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
n/a						
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ited Liability Company," the	designation "LLC"	or the ab	breviatio	n
Enter new principal offices address, if appli	cable:	n/a	ي. جي	•.		
(Principal office address MUST BE .4 STRE		P	⁰ 5.			
•					ص.	a 15 days
				200		i ir apai
Enter new mailing address, if applicable:	n/a		25 pt	~2	F 3-182	
(Mailing address MAY BE A POST OFFICE BOX)				(2022) (1) (1)		**
				: ' \ <u>C</u>	777	e de ciri e o
				00	9	7 marks
B. If amending the registered agent and registered agent and/or the new registered of			ords, enter the r	taine of	the_nev	W Trissic
general agent and of the new registered o	Tire address ner	ξ.		D/m	O1	
Name of New Registered Agent:	n/a			·		
New Registered Office Address:	n/a		- · · · · · · · · · · · · · · · · ·			
		Enter Flori	da street address			
	n/a		, Florida <u>n/a</u>			
		Clry·	Zi	p 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> <u>Address</u> Type of Action Alwel S.A. **MGRM** 1110 Brickell Avenue Suite 310 Remove Miami, Florida 33131 **MGR** c/o 1110 Brickell Avenue Ricardo Borges Simoes Suite 310 Miami, Florida 33131

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

Article VI. Management

This will be a manager-managed company. The name and address of each Manager is:

Ricardo Borges Simoes

c/o 1110 Brickell Avenue, Suite 310

Miami, Florida 33131

Dated September 16

2013

Signature of a member or authorized representative of a member Key Trade Corporation, Member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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