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(Re	questor's Name)		
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PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
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10 FEB -4 M 8: 45

SECRETARY OF STATE

D. BRUCE

FEB 5 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2010

MARIELA M. OLIVEROS 8355 NW 108 AV # 1 DORAL, FL 33178

SUBJECT: INVERSIONES MOLIVER LLC

Ref. Number: L09000115427

10 FEB -4 AM 8: 45
SECRETARY OF STATE

We have received your document for INVERSIONES MOLIVER LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 810A00001924

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To Florida Department of State Division of Corporations

Subject: Inversiones MoliverLLC. Ref# W100 0000 1159 Letter # 810A 0000 0714

I am very sorry for the incorrect information I sent, but I have revised the problem. If you have any questions please feel free to contact me. If you could send me back the remainder of the money I would greatly appreciate it.

Sincerely Mariela Uliveros

Mark

FILED

10 FEB -4 AN 8: 45

SEURETARY OF STATE
FALLAHASSEF, FI DBIRA



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 11, 2010

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MARIELA OLIVEROS 8355 NW 108 AV # 1 DORAL, FL 33178

SUBJECT: INVERSIONES MOLIVER LLC

Ref. Number: W1000001159

FILED

10 FEB -4 MM 8: 45

SECRETARY OF STATE
TALLAHASSEF FLORIDA

We have received your document for INVERSIONES MOLIVER LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 810A00000714

COVER LETTER

TO: Registration S Division of Co	ection rporations				
SUBJECT:	INVERSION	ES MOLIVER LLC.			
	Name of Limi	ted Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	M	ARIELA M OLIVEROS			
		Name of Person			
	INVE	RSIONES MOLIVER LLC.			
		Firm/Company		De -	
				0 F	
		3355 NW 108 AV # 1 Address		FEB -4 Che TARY LAHASSEI	_
		Maicos		ARY SSE)
		DORAL,FL, 33178	<u>.</u>	TARY OF STATE ASSEE, FLORIDA	٦
		City/State and Zip Code			~
	F-mail address: (m76inc@yahoo.com to be used for future annual report notifice	ation)		
For further information	concerning this matter, please of	•		_	
MARIE	LA M OLIVEROS	at (954)5	13-8673		
	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)	Certified (of Status &	
Regis	LING ADDRESS: tration Section	STREET/COURIE Registration Section			
Divis	ion of Corporations	Division of Corporat	ions		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

INVE	<u>RSIONES I</u>	MOLIVER LLC.			
(Name of the Limited) (A	<mark>Liability Compa</mark> Florida Limited L	ny as it now appears on liability Company)	our records.		
The Articles of Organization for this Limited Lia Florida document number L09000115		were filed onDece	mber 04 . 20	009 and ass	iigned
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
	SAME AS	ABOVE			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company,"	the designation	"LLC" or the a	abbreviation
Enter new principal offices address, if applicable:		10808 NW 58 ST	REET		
(Principal office address MUST BE A STREET	(ADDRESS)	DORAL, FL 331	78	TA _S	<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/oregistered agent and/or the new registered off	r registered of			EB-4 AM 8: 45 HASSEE, FLORIDA the name of	of the new
Name of New Registered Agent:		OLIVEROS			
New Registered Office Address:	10808 NW 58 STREET Enter Florida street address				
		DORAL		0047	۵
	<u> </u>	City	, Florida _	Zip Code	
New Registered Agent's Signature, if changing Re	egistered 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

Page 1 of 2

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

<u>Title</u>	Name	Address	Type of Action		
MGRM	MARIELA M OLIVEROS	10808 NW 58 STREET DORAL , FL 33178	✓ Add Remove		
<u>MGRM</u>	RICARDO MORANTES	10808 NW 58 STREET DORAL , FL 33178	✓ Add ☐ Remove		
REG A	MESA, MANUEL A ESQ	730 NW 107TH AVENUE SUITE 115 MIAMI FL 33172	Add _☑ Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
		ECRETARY OF S	OFEB-4 AM 8		
Dated	in the second of		_ &		
-	Signature of a member or authorized representative of a member MARIELA M OLIVEROS Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00