

L100000259451

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000259451 3)))



H100002594513ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : RICARDO MARTINEZ-CID, P.A.
Account Number : 076640001666
Phone : (305) 859-7494
Fax Number : (305) 858-2513

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

Email Address: MARIANGELLO@LATINBT.COM
CC: OMK4T@GMAIL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
COMERC ANDINA LIMITED LIABILITY COMPANY

Certificate of Status	1
Certified Copy	1
Page Count	08
Estimated Charge	\$60.00

D. BRUCE

DEC- 3 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

RECEIVED
10 DEC -2 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
10 DEC -2 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC. 2. 2010 3:27PM

RICARDO MARTINEZ

NO. 300 P. 3

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: COMERC ANDINA LIMITED LIABILITY COMPANY
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:

RICARDO MARTINEZ-CID, ESQ.

Name of Person

RICARDO MARTINEZ-CID, P.A.

Firm/Company

1699 Coral Way, Suite 510

Address

MIAMI, FLORIDA 33145

City/State and Zip Code

mtnezcid@aol.com

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

For further information concerning this matter, please call:

RICARDO MARTINEZ-CID, ESQ.

Name of Person

at (305)

632 1950

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)

☒ \$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
10 DEC -2 PM 12:17
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

COMERC ANDINA LIMITED LIABILITY COMPANY

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on January 25, 2010 and assigned Florida document number L10000009154.

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 offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

501 Brickell Key Drive

Suite 504, Miami, Florida 33131

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, 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

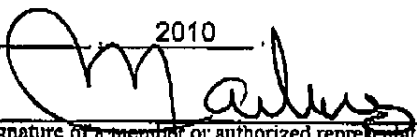
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MVP/T	PEDRO VICENTE BELLO	501 Brickell Key Drive Suite 504, Miami, Florida 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MVP/S	JOSE LUIS BELLO LUY	501 Brickell Key Drive Suite 504, Miami, Florida 33131	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
M/P/ST	OSWALDO NIETO DONIS	501 Brickell Key Drive Suite 504, Miami, Florida 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Article V of the Articles of Incorporation is amended to read:

SEE EXHIBIT "A" ATTACHED AND BY REFERENCE MADE A PART HEREOF
FOR AMENDED TEXT OF ARTICLE V.

Dated December 2, 2010


Signature of a member or authorized representative of a member

Corporate General Counsel, Attorney and Resident Agent

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED
10 DEC -2 PM 12:17
CLERK OF STATE
TALLAHASSEE, FLORIDA

FLORIDA BAR NO. 157029 / AUDIT NUMBER: H10000259451 3

COMERC ANDINA LIMITED LIABILITY COMPANY
ARTICLES OF AMENDMENT
EXHIBIT A

"ARTICLE V - Manager and Officers:

The Limited Liability Company will be managed by one (1) manager. The number of managers may either increase or diminish from time to time, as established by the Members, as provided in the Regulations adopted by the Limited Liability Company, but will never be less than one (1). The officers of the Limited Liability Company will be the President, Secretary and Treasurer."

FILED
10 DEC -2 PM 12:17
CLERK OF STATE
ALLAHASSEE, FLORIDA

Ricardo Martinez-Cid, P.A.
1699 Coral Way, Suite 510
Miami, Florida 33145-2860
Telephone # (305) 859-7494
Facsimile # (305) 858-2513
FLORIDA BAR NO. 157029 / AUDIT NUMBER: H10000259451 3