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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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ECRETARY OF STATE OF

TO ACKNOWLEDGE SUFFICIENCY OF FILIN TO DEPARTHENT OF STATE DEVALUE OF CORPORATIONS

B. KOHR

JAN - 5 2011

EXAMINER

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 5	52-5973		
	Of	fice Use Only	1
CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if kn	own):	5:3°
1. PROXY USA	26		Ö.
(Corporation Name)	(Document #)		·
(Corporation Name)	(Document #)		
3. (Corporation Name)	(Document #)	· .	
4. (Corporation Name)	(Document #)	·	
Walk in Pick up time _ Mail out Will wait	2. ∞ □ Photocopy	Certified Copy Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>		
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger	ed Agent	
OTHER FILINGS	REGISTRATION/OU	ALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark	· • .	
	Other	Examiner's Initials	
CR2E031(7/97)	•	Examine 5 Initials	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1 Jan S PAR. 36

	PROXY USA LLC		٠ , ر
(Name of the Limited (A	Liability Company as it now appea Florida Limited Liability Company)	rs on our records.)	_
The Articles of Organization for this Limited Lia	• • •	02/22/2010 and	assigned
Florida document number LI 00 000 19 54	1		
This amendment is submitted to amend the following	wing:		
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation "LLC" or	he abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			***
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered offi		our records, enter the nam	e of the new
Name of New Registered Agent:			
New Registered Office Address:	****		
	Enter Florida street address		
•	City	, Florida Zip C	odo.
	Cuy	Zip C	vue

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>	Name	Address	Type of Action
MGRM	Ekaterina Kolotova	17201 Collins Ave, #1701 Sunny Isles Beach, FL 33160	Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
	•		Add Remove
***************************************			Add Remove
	ling any other information, enter chan aterina Kolotova to have 1% sha	nge(s) here: (Attach additional sheets, if necessary.) res in Proxy USA, LLC.	-
All distributions			-
<u> </u>	n ed		- -
¥ Dated <u>Ū́́́</u>	Menature of a memb	er or authorized representative of a member	
	X / NOVON	> Cry 6° 1	