

(Re	equestor's Name)	<del></del>
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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SECRETARY OF STATE

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## **COVER LETTER**

TO:	Registration Sec Division of Corp					
4.	vi,					
CHR H		lectric Miami LLC	ectric Miami LLC			
:- :-	SUBJECT:					
The en	nclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspon	idence concerning this matter	to the following:			
		ARIE GAD				
			Name of Person			
		AMERICAN ELECTRIC				
			Firm/Company			
	19355 TURNBERRY WAY APT 23					
			Address	<del></del>		
		AVENTURA FL 33180				
			City/State and Zip Code			
			ariyandigad@gmail.com			
		E-mail address: (	to be used for future annual report notification	ALL SE	2017	
For fur	rther information co	ncerning this matter, please c	all:	AH	≥ 71	
ARIE	GAD	•	786 440-9999 at ( )	ASSE	FILE	
	Name of	Person	Area Code Daytime Tele	phone Number 9	<u></u>	
Enclos	sed is a check for the	e following amount:		<b>S</b> m	<u>.</u>	
<b>1</b> \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing I Certificate of Certified Copy (additional copy	Status &	

## 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

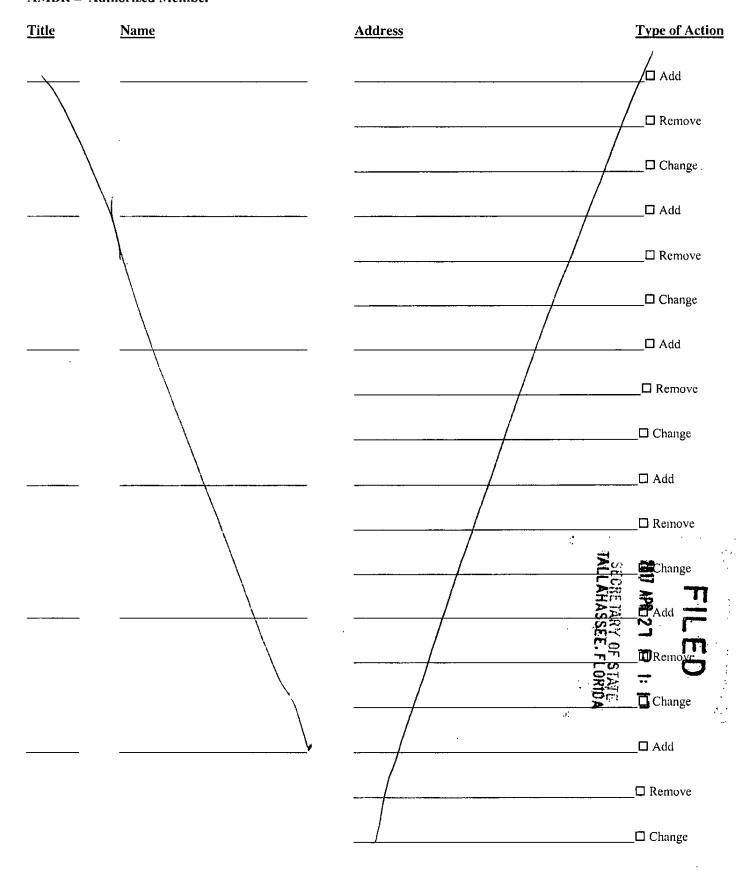
## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Compar A Florida Limited L	ny as it now appears on our	r records.)	
The Articles of Organization for this Limited Lia Florida document number L10000059262	bility Company	were filed on June, 2 2	2010	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
American Electric North America LLC				
The new name must be distinguishable and contain the wo	rds "Limited Liabili	ity Company," the designation	on "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:		2 <del>894 NE 2ND AV</del> E	19667 TU	PRIBERRY WAY
(Principal office address MUST BE A STREET	ADDRESS)	MIAMI, FL 33137	APT 25B	
		AV	ENTURA FI	1:33/BO
	,	•		,
Enter new mailing address, if applicable:		19667		
(Mailing address MAY BE A POST OFFICE B	<i>OX</i> )	19355 TURNBERRY WAY APT # 256		
		AVENTURA, FL 33180		
B. If amending the registered agent and/or registered agent and/or the new registered offi			ecords, enter the	name of the new
Name of New Registered Agent:	ARIE GAD		<del>_</del>	·· · -
- · · · · · · · · · · · · · · · · · · ·	19667 19955 TURNB	258 ERRY WAY APT # ,	AVENTURA RL 33	<b>48</b> 0
New Registered Office Address:		Enter Florida stree	t address	<u> </u>
	AVENTURA, F	L	Florida: 3180	2
		City		in Code
New Registered Agent's Signature, if changing Re	gistered Agent:		S IA	. O
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this cl	and complete pered agent as pe gistered office c	performance of my dut rovided for in Chapter	ies, and I am famil 605, F.S. Or, if th	liar with and is document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR'= Manager AMBR = Authorized Member



If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.				•	
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