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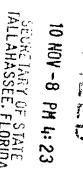
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EXAMINER



900187270419

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 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:
Alphonse 2. Bastien Name of Person
HATTION EXPO !!C
915 NE 125st Sefte
Nosth Mismi F 33161 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shock Franklin at (305) 891-8477 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \t

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

10 NOV-8 PH 4:2. ARTICLES OF ORGANIZATION ed 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 __ Florida document number <u>L10000067719</u> 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 "L.L.C." Haitian Expoll Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) KXOPTH MIDMI B. If amending the registered agent and/or registered office address on our records, enter the name of the new Name of New Registered Agent: Florida street address

WORTH MIAMI Florida 33161

City Zip Code New Registered Office Address:

registered agent and/or the new registered office address here:

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	M Alexis Entrinments	IK 18090 CollinsAV Mirmi Floriza 33	Add AGO Remove		
M60	HBitiso Event	S 915 NE 1255t. SU WERTH MIRMI FERIC	1 200 N Add 2 33161 Remove		
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D. If am	ending any other information, enter o	change(s) here: (Attach additional sheets, if r	necessary.)		
	Alphonse & Bastier	15 Both ReGistered & Gent	ens -		
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		< Member - Stexis Enter			
		Heilian Export And the n			
		115 NE 1250 SUK 200 K			
	•		- Mary V.		
Dated	November 5th,	2010	Expliense E. Bustier		
Signature of a member or authorized representative of a member					
Alphonse R Bostien Typed or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00