## L10000012367

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							

Special Instructions to Filing Officer:

L. SELLERS

OCT 1 8 2010

**EXAMINER** 

Office Use Only



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AMENDA TASSELLANDA TANDA TANDA

## **COVER LETTER**

TO:	Registration Sec Division of Corp						
SUBJE	ECT:	ELECTROCOM	INTERNATIONAL, L	LC			
		Name of Limi	ited Liability Company				
The en	closed Articles of A	Amendment and fee(s) are sub	bmitted for filing.				
Please	return all correspor	ndence concerning this matter	r to the following:				
			ANA B. FERNANDEZ				
•			Name of Person				
		PRAT	SFERNANDEZ & CO, F	<u>.</u>			
			Firm/Company				
•		2121 PONCE DE LEON BLVD, SUITE # 240					
•			Address				
		COF	CORAL GABLES, FL 33134				
		IN EQ.O	City/State and Zip Code	<b></b>			
		E-mail address: (	PRATSFERNANDEZ.Co to be used for future annual report to	otification)			
For fur	ther information co	oncerning this matter, please o	call:				
•		YN TRUJILLO	at (_305 )	444-8333			
Name of Person		Area Code & Day	vtime Telephone Number				
Enclose	ed is a check for the	e following amount:					
- 1	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Registra Divisior P.O. Bo	NG ADDRESS: tion Section to of Corporations x 6327 ssee, FL 32314	STREET/COI Registration Se Division of Co Clifton Buildin 2661 Executive	rporations g			

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELE	ECTROCOM INTE	RNATIONAL	_, LLC		
(Name of the	Limited Liability Compan (A Florida Limited L	y as it now appear ability Company)	s on our records.)		
The Articles of Organization for this Li	mited Liability Company	were filed on	07/09/2010	and assigr	ned
•		were med on		and assign	icu
Florida document numberL100					
This amendment is submitted to amend	the following:				
A. If amending name, enter the new	name of the limited liahi	lity company her	p.		
At it amending name, enter the new	name of the inflict habi	nty company ner	<u>*</u> •		
The new name must be distinguishable and	l end with the words "Limit	ed Liability Compa	ny," the designation "I	LC" or the abb	reviation
"L.L.C."					
Enter new principal offices address, i	f applicable:				
(Principal office address MUST BE A	STREET ADDRESS)				
Enter new mailing address, if applica	ble:				
(Mailing address MAY BE A POST O	FFICE BOX)				
-	<del></del>				
•					
B. If amending the registered ager			ur records, <u>enter 1</u>	he-iname of t	he new
registered agent and/or the new regis	tered office address here	#			
				日常	
Name of New Registered Age	<u></u>				30332
New Registered Office Addres	ze.			May to	
New Registered Office Address	55.	Ent	er Florida street ada	ress us	
			<b></b> 4	1.2 See 1	
	-	Citv	, Florida	Zip Code	
		CHI		ZIII COUC	

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** MGR OSCAR F. ANTICH 4624 NW 114 AVE. SUITE 904 ☐ Add MIAMI FL 33178 Remove Remove \_\_\_ Add \_ Remove ☐ Add Remove \_\_\_Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) SEPT. 14 2010 Dated \_ Signature of a member or authorized representative of a member FRANCESCO TANSELLA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00