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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Colombia Reserva de Oro, LC
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:
Christopher Paul, un
Colombia Report de On, LC
rim/Company
150 SE 2nd Ave #712
Address
Miami F 33131
City/State and Zip Code Chnssy & Solfering Gold.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
E-mail address: (to be used for future/annual report notification)
For further information concerning this matter, please call:
Chasy Paula at (812) 530 3037 Daytime Telephone Number 3
Sin W
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(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 Now holder N. 2010 and assigned
Florida document number 41000 0122 074	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	150 SE 2nd Ave #712
(Principal office address MUST BE A STREET ADDRESS)	Miani Te 33131
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature if abording Partered Agent.	tophi Partick Enter Provide street address
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office company has been notified in writing of this change. If Chan	performance of my duties, and Lam familiar with and provided for in Chapter 605, F.S.F.Or. if this document is address, I hereby confirm that the limited liability ging Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>MbR</u>	CHRISTINE Paulick	1504 2nd Me	Add
		Mani FL35131	Remove
		1900 N Bryshor D. Miami FL 35132	Change
		MIAMI FL 35132	Add
			□ Remove
			Change
			□ Remove
			☐ Change
			☐ Add
		TALLAHASSEE, FLORIDA	Remove
		ر با المراجعة المراج المراجعة المراجعة الم	Change
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<u>iote:</u> If the o ocument's e	te, if other than the date of filing:	this date will not be lis	sted as
	pecifies a delayed effective date, but not an effective time, at 12:03 day after the record is filed.	1 a.m. on the ear	lier o
ated	June 16 2016.	7. 2.	
	Signature of a member or authorized representative of a member	2916 JUN I	-
	Typed or printed name of signee	355	Li
	Page 3 of 3	A III:	

Filing Fee: \$25.00