

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BAKER & MCKENZIE

Account Number : 074222002135 : (305)789-8900 Phone Fax Number : (305)789-8953

Our file : 50215191.000002

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

stewart.kasner@bakermckenzie.com Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN POULTRY RESEARCH AND TECHNOLOGY SERVICES LLC

Certificate of Status	1
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Electronic Filing Menu

Corporate Filing Menu

K. SALY EXAMINER Help NOV 1 3 2013

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## Poultry Research and Technology Services LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited!	Liability Company were filed on 12/07/	2010	and assigned
Florida document number L10000125648			
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability company here:		
The new name must be distinguishable and end with L.C."	Ith the words "Limited Liability Company,"	the designation "L.I.	. 27 or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ETADDRESS)		
Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE	<u></u>		
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	Vor registered office address on our office address here:	rccords, <u>enter th</u>	name of the new
	13335 SW 124 Street # 107		
New Registered Office Address:		lorida street addre	·
New Registered Office Address:	Enter P	ioriaa sireei aaare	, <b>'S</b>
New Registered Office Address:	Miami	, Florida <u>331</u>	

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 his 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 Regis ered Agent

Page 1 of 3

MGR = Manager -

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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:

MGRM = Managing Member <u>Address</u> Type of Action Title Name 8600 SW 152 Avenue MGR Domingo R. Moreira Miami, FL 33143 Ana M Bru 7610 SW 47 Avenue MGRM Miami, FL 33143

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November	8, 2013
×	Val.
<del></del>	Signature of a member or authorized representative of a moinber
	Domingo R. Moreira

Filing Fee: \$25.00

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