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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT:				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
D'MO Metdinstry Name of Person				
Metdinsty Law Group Firm/Company				
3800 S. OCCO D (#222				
City/State and Zip Code City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Number SR AREA Code & Daytime Telephone Number SR AREA Code & Daytime Telephone Number				
Enclosed is a check for the following amount: \$\frac{1}{2}\frac{1}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}				

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

Febest Panamerica, UC			
(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 of Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
The new name must be distinguishable and end with the words "Limite"L.L.C."	•		
Enter new principal offices address, if applicable:	1725-1727 NW 33 rd St.		
(Principal office address MUST BE A STREET ADDRESS)	1725-1727 NW 33rd St. Formpano Breach, FZ 33064		
Enter new mailing address, if applicable:	1725-1727 NW 3364 St.		
(Mailing address MAY BE A POST OFFICE BOX)	Formpano Broch,		
B. If amending the registered agent and/or registered office address here Name of New Registered Agent:			
New Registered Office Address: 1725 -	1727 NW 33 555 0		
Parpo	Enter Florida street address 200 BCOC, Florida Zip Code		

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 **Title Type of Action** <u>Name</u> **Address** Mark E. Fried Remove ☐ Add Remove ☐ Add ☐ Remove Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member SSDIE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00