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C. LEWIS

APR 4 2011

EXAMINER

COVER LETTER

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: Antonio Regojo Name of Person Firm/Company 880 NE 69 st #14L Address Miami, FL 33138 -ity/State and Zip Code aregojo@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Antonio Regojo Name of Person Antonio Regojo Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: Sections of Status Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations		ation Section n of Corporations		
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Division of Corporations Agencies and Division of Corporations		Registration Section	Registration Sec	ction
P.O. Box 6327 Tallahassee, FL 32314 Zefol Executive Center Circle Tallahassee, FL 32301		1.0.000.0027	2661 Executive	Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

201 APR -4 PM 18 10

(Name of the Lin	Recycling Processes, LLC	ACRETARY OF STATE
(Name of the Lin	nited Liability Company as it now appears (A Florida Limited Liability Company)	on our records:)
The Articles of Organization for this Limite Florida document numberL11000	• • •	03/04/2011 and assigned
This amendment is submitted to amend the	following:	
A. If amending name, <u>enter the new nam</u>	ne of the limited liability company here:	
The new name must be distinguishable and en 'L.L.C."	d with the words "Limited Liability Company	v," the designation "LLC" or the abbreviation
Enter new principal offices address, if ap	pplicable:	
(Principal office address MUST BE A ST	REET ADDRESS)	
		
Enter new mailing address, if applicable	; 	
(Mailing address MAY BE A POST OFF)	ICE BOX)	
B. If amending the registered agent a registered agent and/or the new registered		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	r Florida street address
	City	, Florida Zip Code
	City	zap conc

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>	<u>Name</u>	Address	Type of Action
MGRM	Procesos de Reciclaje S.A.	1442 SW 20th St Miami, FL 33145	Add Remove
MGRM	Estefania Jaramillo	1442 SW 20th St Miami, FL 33145	✓ Add □ Remov e
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ury.)
Dated	March 30 , 20	<u>011 </u>	TARY OF SIA
	_	r or authorized representative of a member Antonio Regojo	95
	Tyned	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00