

05/20/11--01029--016 **55.00

(City/State/Zip/Phone #)

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
MAY 23 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: COSMODUS USA LLC
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:

KENNETH WARNER, ESQ.

Name of Person

KENNETH WARNER ATTORNEY AT LAW

Firm/Company

SUITE 800

Address

5201 BLUE LAGOON DRIVE, MIAMI, FL 33126

City/State and Zip Code

kennethwarnerlaw@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KENNETH WARNER, ESQ.

Name of Person

at (305)

718-3335

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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
OF**

FILED
11 MAY 20 PM 3: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COSMODUS USA LLC

(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 03/21/2011 and assigned
Florida document number L11000035365.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

840 SOUTH ANDREWS AVENUE

POMPANO BEACH, FLORIDA 33069

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

840 SOUTH ANDREWS AVENUE

POMPANO BEACH, FLORIDA 33069

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ERIC R. MAYER

New Registered Office Address:

840 SOUTH ANDREWS AVENUE

Enter Florida street address

POMPANO BEACH

, Florida

33069

City

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.

[Signature]
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:

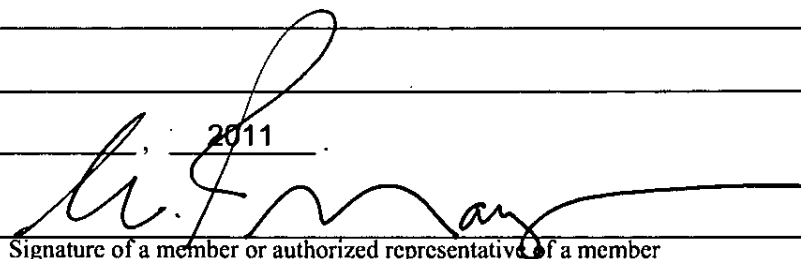
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ERIC R. MAYER	840 SOUTH ANDREWS AVENUE POMAPNO BEACH, FLORIDA 33069	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	IAN WEST	2607 SUGARLOAF LANE FORT LAUDERDALE, FLORIDA 33312	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated MAY 16, 2011


Signature of a member or authorized representative of a member

ERIC R. MAYER

Typed or printed name of signee