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CHD ICA	COPPINTE	R X8, LLC		
SUBJEC	VII	Name of Lim	ited Liability Company	
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			-	
Please re	cturn all correspo	ndence concerning this matter	to the following:	
		INDYARA CATRAMBY	ANDION PIQUET	
		PINTER NS, LLC Name of Limited Liability Company cles of Amendment and feets) are submitted for filing. Discrepandence concerning this matter to the following: INDYARA CATRAMBY ANDION PIQUET Name of Person PIQUET LAW FIRM PA Firm/Company 1000 BRICKELL AVENUE, SUFTE 201 Address MIAMI, FL 33131 City/State and Zip Code JANINi@PIQUETLAWFIRM.COM E-mail address: to be used for future annual report notification) aution concerning this matter, please call: RAMBY ANDION PIQUET Name of Person at () 558-8054 Area Code Daytime Telephone Number Area Code Certificate of Status Certified Copy radditional copy is enclosed) MAILING ADDRESS: Registration Section STREET/COURIER ADDRESS: Registration Section		
		PIQUET LAW FIRM PA	esubmitted for filing. atter to the following: IBY ANDION PIQUET Name of Person	
		n	Firm/Company	
		1000 BRICKELL AVENU	JE, SUITE 201	
			Address	
		MIAMI, FL 33131		
			•	
				Indiana
For furth	ner information co		•	ication)
			786 558-8054	
	Name o	l'Person	at () Area Code Daytime	Telephone Number
Enclosed	d is a check for th	ne following amount:		
\$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Registr Divisio P.O. Be	ution Section n of Corporations	Registration Section Division of Corport Clifton Building	n utions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COPPINTER X8, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number L11000035990	ompany were filed on <u>03/24/2011</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
N/A		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or	
Enter new principal offices address, if applicable:		TALL.
Principal office address MUST BE A STREET ADDR	(ESS)	
		76
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Plantage and the	
	Enter Florida street address	
	, Florid	
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Costa Pinto Participações S/A	1000 Brickell Ave. Ste 201.	
		Miami, Florida 33131	□ Remove
MGR	Francisco Carlos Alves Pinto	1000 Brickell Ave. Ste 201	
		Miami, Florida 33131	☐ Remove
			☐ Change
			
			□ Remove
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record speci	ies a delayed effe	ctive date, bu	t not an efi	fective/time	e. at פירו	am on the	e earlier
he 90th day	after the record is	i filed.			-, I		• •••••••
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	co Carlos Alves Pinto		- 1	- 1			

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