

L11000039313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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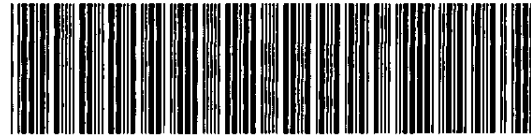
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

OCT 24 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Global Animal Health, 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:

Hector G. Mora, Esquire

Name of Person

Wellstein Mora Rodriguez International, PC

Firm/Company

1789 Columbia Road, NW Ste. 200

Address

Washington DC 20009

City/State and Zip Code

hmora@wmr-law.com

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Hector G. Mora

at (202)

558-6515

Name of Person

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**

Global Animal Health, LLC

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/01/2011 and assigned
Florida document number L11000039313.

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: 5585 NW 72 Ave.
(Principal office address MUST BE A STREET ADDRESS) Miami FL 33166

Enter new mailing address, if applicable: C/O. Natiana Marante
(Mailing address MAY BE A POST OFFICE BOX) 6020 NW 99 Ave. Ste.209
Miami FL 33178

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: Betzaida Murphy
New Registered Office Address: 13164 SW 93rd Place
Enter Florida street address
Miami, Florida 33176
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.

Betzaida Murphy

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>
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MGR	Tamara Despujols	101 Crandon Boulevard, # 381 Key Biscayne, FL 33149	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MGR	Betzaida Murphy	13164 SW 93rd. Place Miami, FL 33176	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated September 22, 2011

Signature of a member or authorized representative of a member
Hector G. Mora, Esquire

Typed or printed name of signee

FILED
OCT 21 AM 11:48
STATE OF FLORIDA
CLERK OF THE COURT
JULIAN A. GARCIA