L11000040862

(Re	equestor's Name)	1
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SECRETARY OF STATE
ANASSEF, FLORIDA

COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Co	rporations				
SUBJECT:	INVERSIONES	S EL TIMON USA L	LC		
	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please return all correspondent	ondence concerning this matte	r to the following:			
	VALERIO	VALERIO DI PERSIO DI BERNARDO			
		Name of Person			
	INVERS	SIONES EL TIMON USA	A LLC		
		Firm/Company	-		
		Address			
		City/State and Zip Code			
	E-mail address: (to be used for future annual repor	t notification)		
For further information of	concerning this matter, please of	call:			
PEDR	O LUZQUINOS	at (954)	655-8413		
Name o	f Person	Area Code & D	aytime Telephone Number		
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/CO Registration S Division of C Clifton Buildi	orporations		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

INVERSIONES EL (Name of the Limited Liability Compa (A Florida Limited I	TIMON USA	SECRETARY (LLOALLAHASSEE s on our records.)	FLORIDA
The Articles of Organization for this Limited Liability Company Florida document numberL11000040862			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Limi" L.L.C."	ited Liability Compa	ny," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applicable:	8322 NW 681	H ST	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33	166	
Enter new mailing address, if applicable:	8322 NW 68T	TH ST	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33	166	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	Eni	er Florida street add	ress
	, Florida		
	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.

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 = 1	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			AddRemove
			AddRemove
D Ifomon	ding any other information, enter change	ge(s) here: (Attach additional sheets, if necessa	2791)
D. II amen	ding any other information, enter chang	e(s) here: (Anach additional sheets, y necesso	As 1
			1 NOV
			FIL ASSE
			PM 12: FLORI
_		\wedge	2: 15 ATTA RIDA
Dated	OCTOBER, 24	011 .	
	Signature of a member	r or authorized representative of a member	
		PI PERSIO DI BERNARDO	
		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00