

L11 0000 56667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900272749289

05/15/15--01018--008 **25.00

FILED
15 MAY 15 AM 10:40
SECRETARY OF STATE
TREASURY DEPARTMENT
WASHINGTON, DC 20540

MAY 21 2015

J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EDWARD OVERSEAS 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:

EDITH ALVAREZ

Name of Person

EDWARD OVERSEAS LLC

Firm/Company

7138 SPORTSMANS DRIVE

Address

N. LAUDERDALE, FL 33068

City/State and Zip Code

EDWARD CUADRA@YAHOO.ES

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

For further information concerning this matter, please call:

EDITH ALVAREZ

954 274-9298

at (_____) _____

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**

EDWARD OVERSEAS 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 05/12/2011 and assigned
Florida document number L11000056603.

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 contain 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)

7138 SPORTSMANS DRIVE

N LAUDERDALE, FL 33068

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7138 SPORTSMANS DR

N LAUDERDALE, FL 33068

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:

New Registered Office Address:

7138 SPORTSMANS DR

Enter Florida street address

N LAUDERDALE

City

Florida

33068

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>	<u>Address</u>	<u>Type of Action</u>
MGR	EDWARD CUADRA	7138 SPORTSMANS DR	<input type="checkbox"/> Add
		N LAUDERDALE, FL 33068	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	MILAGROS T ULLOA	7138 SPORTSMANS DR	<input type="checkbox"/> Add
		N LAUDERDALE, FL 33068	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

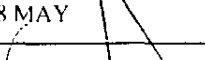
SECRETARY OF
THE ARMY
WASHINGTON, D.C.

15 MAY 15 AM 10

SECRETARY OF STATE
WASHINGTON, D.C.
MAY 15 10:51 AM '61

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 8 MAY 2015 .


Signature of a member or authorized representative of a member

EDWARD CUADRA, MEMBER

Typed or printed name of signee