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SEUNIASSENT FLORIDA

B. BOSTICK
DEC 1 3 2011
EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
SUBJI	ECT:	P ₍ Name of Lim	roex USA, LLC ited Liability Company	<u></u>		
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
		Alexsand	de Savitskig Name of Person	.		
			OEX USA, LLC Firm/Company			
		284	44 Ponce C+			
		Holiday Vic E-mail address:	City/State and Zip Code CHOCIES 16 @ 9mc to be used for future annual report notifical	ail.com	11 DEC 12 F	CONTRACTOR OF THE CONTRACTOR O
For fur	ther information	concerning this matter, please c			SSE 72	,
	Ale	✓ of Person	at (727) 647-4 Area Code & Daytime T	196 elephone Number	FIT 4: 59	,; <u>***</u>
Enclose	ed is a check for t	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 F Certificate of Certified Cop (additional co	Status &	

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

<u>Proex us</u>	A, LLC
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
Checkered, LLC The new name must be distinguishable and end with the words "Lim	-
The new name must be distinguishable and end with the words "Lim 'L.L.C."	4
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>	PO BOX 904, Loomis, CA 95650
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent: Name of New Registered Agent:	// A
New Registered Office Address:	Enter Florida street address in
	DE 9
	, Florida

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.

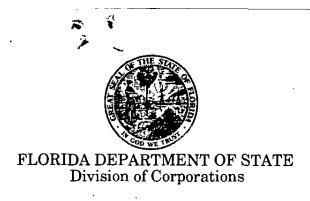
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> Address **Type of Action** ☐ Remove □ Add Remove Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Aleksandr Savitskiy
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00



December 5, 2011

ALEKSANDR SAVITSKIY CHECKERED, LLC 2844 PONCE COURT HOLIDAY, FL 34691

SUBJECT: PROEX USA LLC Ref. Number: L11000077992

We have received your document for PROEX USA LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

PAGE 2 OF 2 MISSING

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 511A00027161