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TALLAHASSEE, FLORIDA

**NELSON SLOSBERGAS, P. A.**

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NELSON SLOSBERGAS  
ATTORNEY AND CIVIL LAW NOTARY

(305) 374-0030  
FAX (305) 374-2855

December 2, 2014

Secretary of State  
Registration Section/Division of Corporation  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**RE: JCN COMERCIO E REPRESENTACOES LLC**

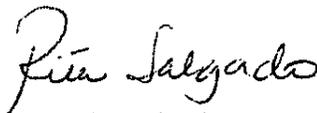
Dear Sir or Madam:

Please find attached the Limited Liability Company Articles of Amendment to Articles of Organization of JCN COMERCIO E REPRESENTACOES LLC, and check for the filing fee in the amount of \$25.00.

Kindly return the letter of acknowledgment in the attached *federal express envelope*, once the amendment has been filed.

Thank you for your attention to this matter.

Very truly yours,



Rita Salgado

Corporate Legal Secretary

[Direct E-Mail: [rita@miami-intl-law.com](mailto:rita@miami-intl-law.com)]

Enclosures (as noted)

**VIA FEDEX**

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**JCN COMERCIO E REPRESENTACOES 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 July 19, 2011 and assigned Florida document number L11000082979.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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: Nelson Slosbergas, P.A.

New Registered Office Address: 1110 Brickell Ave. - Suite 310

Enter Florida street address

Miami, Florida 33131

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**

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)*

Dated December 2nd, 2014

\_\_\_\_\_  
Signature of a member or authorized representative of a member

**Jose Gustavo Alves Cordeiro**

\_\_\_\_\_  
Typed or printed name of signee

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Filing Fee: \$25.00

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