L11000090070

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COVER LETTER

TO:

Registration Section
Division of Corporations

HENRY PITTIER INTERNATIONAL HOLDINGS LLC

SUBJECT:

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:

GUEVARA, JOSE

Name of Person

HENRY PITTIER INTERNATIONAL HOLDINGS LLC

Firm/Company

16609 SW 79TH TERRACE

Address

MIAMI FL 33193 US

City/State and Zip Code

info@hpittier.com

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

For further information concerning this matter, please call:

JOSE GUEVARA

305 5074285

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**

FILED 12 NOV 13 AM 10: 11

HENRY PITTIER INTERNATIONAL HOLDINGS LLC

SECRETARY OF STATE

ALL AHASSEE, FLORIDA (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 08/05/20	11 and assigned
Florida document number <u>L11000090070</u>	············	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Maning dadress MAT BE A LOST OFFICE BOA	 	
	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	rida street address
		_, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
D	JOSE GUEVARA	16609 SW 79TH TERRACE MIAMI FL 33193 US	Add
		<u></u>	Remove
MGR	JOSE GUEVARA	16609 SW 79TH TERRACE MIAMI FL 33193 US	Add
			_ Remove
			Add
			Remove
			Add Remove
			Add
			Remove
			Add
			Remove

If amending any other informat	tion, enter change(s) here: (Attach additional sheets, if necessary.)
	
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	43
November 8 th	,/2012
	() MUS
Sign	nature of a member or authorized representative of a member
	NELSON VASQUEZ
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

12 NOV 13 AM IO: 11