## 111000116612

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JIVISION OF CORPORATION

## **COVER LETTER**

TO: Registration Division of C			
SUBJECT: 15	T Internation	nal, LLC.	
		ted Liability Company	······································
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corres	pondence concerning this matter t	to the following:	
	Sandy	P. Tejera Name of Person	
	IST In	ternational, L	
	8825 su	185th terrac	AUG 19
	Cutter Ba	Y, FL. 3315 City/State and Zip Code Va & Vocket mail.	7 = 5t
	Sandy teje E-mail address: (b	va e) vocketmail	. com
For further information	concerning this matter, please ca	ıll:	
Sandy	P. Tejera	at (305) 773 -	3705
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 cupy is enclosed)
<u>Mailing Addr</u> Registration		Street Address: Registration Sect	ion
•	Corporations	Division of Corp	
P.O. Box 63	327	The Centre of Ta	llahassee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IST Internation	inal, LLC	
(Name of the Limited Liability Compa (A Florida Limited I.	ny as it now appears on our records.)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number 11000116612	were filed on 10 1 2 1 11	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability".	K, LLC	breviation "L.L.C."
Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	SAME	22 AI
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	SAME	SION OF CHAIR CARRIED
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, enter the nam	e of the new registered
Name of New Registered Agent:	SAME	<del></del>
New Registered Office Address:	SAME Enter Florida street address	
	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 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.

City

Zip Code

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>	Type of Action
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