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## **COVER LETTER**

TO: Registration Se Division of Cor					
SABATER SUBJECT:	CACERES TRADING LLC				
SUBJECT:	Name of Limi	ited Liability Company	71 <u>2 3,12 , 14 14 19 19 19 19 19 19 19 19 19 19 19 19 19 </u>		
	Amendment and fee(s) are submitted and fee(s)				
, , , , , , , , , , , , , , , , , , , ,	Diego J. Sirulnik				
		Name of Person			
	Alex D. Sirulnik, P.A.				
		Firm/Company	<u> </u>		
	2199 Ponce de Leon Blvd.	, Suite 301			
		Address			
	Coral Gables, Florida 3313	14			
	<u></u>	City/State and Zip Code			
	djs@sirulniklaw.com			03	
	E-mail address: ()	to be used for future annual report notifica	dion)	=======================================	
For further information c	oncerning this matter, please ca	all:	新	<b>]</b>	7
Diego J. Sirulnik		305 443-7211 at ()	SSEE.	2015 JUL 17	
Name of Enclosed is a check for the	f Person  ne following amount:	Area Code Daytime T	clephone Numbers STATE A	P #: 28	J
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Control (additional control)	of Status & opy	

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

SABATER CACERES TRADING LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	thy as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L11000125211</u> .	were filed on November 3, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	sility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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:	TALLA	2015 .
••••	AS	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<b>少一一</b>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, ente	the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida 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 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>	Name	Address	Type of Action
MGR	Beatriz A. Acevedo Sabater	8765 NW 116 COURT	
		DORAL, FL 33178	■ Remove
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Signature of a member or authorized representative of a member		
	d	7/16 2015
Walter F. Thurrington Sabater, Manager		Signature of a member or authorized representative of a member
		// ,
Typed or printed name of signee		Walter F. Tharrington Sabater, Manager

Page 3 of 3

Filing Fee: \$25.00