L11000145241

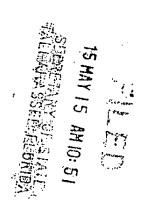
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800272749298

05/15/15--01018--009 **25.00



MAY 21 2015 J SHIVERS

COVER LETTER

	Registration Division of C			
, SUBJEC	MEDE E	BUSINESS INTERNATIONAL I	LLC	
JOBOLE		Name of Lim	nited Liability Company	
The enclo	osed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corres	spondence concerning this matter	to the following:	
		EDITH ALVAREZ		
			Name of Person	
		MEDE BUSINESS INTE	RNATIONAL LLC	
			Firm/Company	
		7138 SPORTSMANS DR	IVE	
		 	Address	
		N. LAUDERDALE, FL 33	3068	
			City/State and Zip Code	
		EDWARDCUADRA@YA	HOO.ES to be used for future annual report notif	<u> </u>
				ication)
For furthe	er informatior	n concerning this matter, please c	all:	
EDITH A	ALVAREZ		954 274-9298 at ()	
	Name	e of Person	at () Area Code Daytime	e Telephone Number
Enclosed	is a check for	the following amount:		
\$25.0	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)
	Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 322	n ations nter Circle ~ -

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MEDE BUSINESS INTERNATIONAL L					
(<u>Name of the Limited Liab</u> (A Flori	oility Company as it now appears on our records.) ida Limited Liability Company)				
The Articles of Organization for this Limited Liability Florida document number L11000145241	Company were filed on 12/29/2011 and assigned and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability company here:				
The new name must be distinguishable and contain the words "L	imited Liability Company." the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	7138 SPORTSMANS DRIVE				
(Principal office address MUST BE A STREET ADI	DRESS) N LAUDERDALE, FL 33068				
Enter new mailing address, if applicable:	7138 SPORTSMANS DR				
(Mailing address MAY BE A POST OFFICE BOX)	OX) N LAUDERDALE, FL 33068				
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac Name of New Registered Agent:	gistered office address on our records, enter the name of the reddress here:				
New Registered Office Address: 713	8 SPORTSMANS DR				
N L	AUDERDALE Florida street address Florida 33068 5				
No. Desiration I Associate Clausation (Calculation Desiration	City Zip Code				
New Registered Agent's Signature, if changing Registe	red 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>	<u>Name</u>	Address	Type of Action
MGR	ULLOA GAVILANO, MILAGRO:	7138 SPORTSMANS DR	Add
		N LAUDERDALE, FL 33068	□ Remove
		<u></u>	■ Change
MGR	CUADRA, EDWARD	7138 SPORTSMANS DR	
		N LAUDERDALE, FL 33068	□ Remove
			⊞ Change
			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			☐ Remove
			□ Change
			☐ Remove
			Change

	<u> </u>					
	, 	. ——				
			· · · · · · · · · · · · · · · · · · ·			
					<u> </u>	
		<u> </u>	···	<u></u>		
			<u> </u>			
			_			
			···			
-						
						
	<u> </u>			<u> </u>		
					_ _	
					-	
Effective	e date, if other than the date m	ie date of filin	ng:		(optic	onal)
f an effect Note: If	ive date is listed, the date m the date inserted in this	ust be specific an block does not	d cannot be prior	to date of filing or a	more than 90 days after ne requirements, this	filing.) Pursuant to 605.02 date will-not be listed
	t's effective date on the				3	इं. इ
						三
	rd specifies a delay Oth day after the re			t an effective	time, at 12:01 a	i.m. on the earlier
	·		•			
Dated 8	MAY		2015			
Daico		- , -	. •	<u> </u>		5
	M	6:		orized representativ		
		Name to the Alice	i memper or suthe	arizea renresentativ	e or a member	
		Signature of a	member of dame	Tibed representation		

Page 3 of 3

Filing Fee: \$25.00