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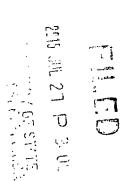
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## COVER LETTER

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Registration Section Division of Corporations

## INTERPRODUX, 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:

	, JUAN CARLOS SANCH	EZ				
		Name of Person		<del></del>		
	INTERPRODUX, LLC					
	Firm/Company					
	1451 W. Cypress Creek R	oad., Suite 300				
		Address				
	Ft. Lauderdale, FL 33309					
	City/State and Zip Code					
	E-mail address: (	to be used for future annua	al report notificati	on)		
For further information	concerning this matter, please c	all:				
JUAN CARLOS SANCHEZ		954 at ( )	980-9452			
Name	of Person	Area Code	Daytime Tel	ephone 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 e		□ \$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

## INTERPRODUX, 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  $\frac{01/09/2012}{1}$ and assigned Florida document number L12000004039 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 1451 W. Cypress Creek Road., Suite 300 Enter new principal offices address, if applicable: Ft. Lauderdale, FL 33309 (Principal office address MUST BE A STREET ADDRESS) 1451 W. Cypress Creek Road., Suite 300 Enter new mailing address, if applicable: Ft. Lauderdale, FL 33309 (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: New Registered Office Address: Enter Florida street address

#### 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

Florida

 $(\cdot)$ 

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
CDO/VP	MARGARET DELMONT-SANCHEZ	1451 W. Cypress Creek Road., Suite 300	<b>X</b> Add
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Filing Fee: \$25.00