

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

373259

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RODECIA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

APR - 5 2012

EXAMINER

112000088392

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

RODECIA 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 02/13/2012 and assigned
Florida document number L12000021250.

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 end with the words "Limited Liability 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:

(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

City, Florida 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 Changing Registered Agent, Signature of New Registered Agent

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112000088392

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	SUAREZ, MARIA ELISA	P.O. BOX 546283 SURESIDE FL 33154 US	☐ Add ☒ Remove
MGRM	DECIA DE FRANCESCO	P.O. BOX 546283 SURESIDE FL 33154 US	☐ Add ☒ Remove
MGRM	BASSO, MARIANA E.	P.O. BOX 546283 SURESIDE FL 33154 US	☒ Add ☐ Remove
MGRM	DECIA, RODOLFO DANIEL	P.O. BOX 546283 SURESIDE FL 33154 US	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated March 30th 2012

Signature of a member or authorized representative of a member

Typed or printed name of signer

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Filing Fee: \$25.00

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