L12000037836

(Re	equestor's Name)			
(Ac	ldress)	,,,, <u></u>		
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(Cir	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bı	ısiness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer:			
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J. HARRIS

COVER LETTER

	Registration Sec Division of Corp					
SUBJEC"		TERNATIONAL LLC				
SUBULC	· ·	Name of Limi	ited Liability Company			
			•			
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please reti	urn all correspo	ndence concerning this matter	to the following:			
		CARMEN L MASIERI		·		
			Name of Person			
		OTMAR INTERNATION	AL LLC			
			Firm/Company			
		10520 SW 158th CT APT	207			
			Address			
		MIAMI FL 33196				
			City/State and Zip Code	 		
MASIERISLO@HOTMAIL.COM						
			to be used for future annual report notific	cation)		
For furthe	r information co	oncerning this matter, please ca	all:	•		
SILVIO	MASIERI		305 298 2690 at ()			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed	is a check for th	e following amount:				
屋 \$25,00	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

OTMAR INTERNATIONAL LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) iability Company)	.
The Articles of Organization for this Limited Liability Company of Florida document number L12000037836	were filed on 03/19/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		21: 5
		- P π
		23 P
Enter new mailing address, if applicable:		- Ba - B
(Mailing address MAY BE A POST OFFICE BOX)		
		高祖 3
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	<u>-</u>
	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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MILDENBERG, OTTO		
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		MIAMI FL 33196	☐ Change
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Effective	date, if other that we date is listed, the d	an the date of fi	06/15/2 ling:	:015		(ор	tional)		
Note: If a document	the date inserted in 's effective date on	this block does not the Department of	ot meet the ap of State's reco	oplicable statut ords.	ory filing req	uirements, th	nis date will	not be list	ed
	d specifies a de Oth day after th			not an erre	ective time	, at 12:01	a.m. on t	ne earli	er
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Dated		/			7 11 1/1 1 l	, , ,		<u> </u>	-
Dated		Signature o	f a member or	authorized repre				٠. ز	_
Dated	CARMEN L MA	Signature o		·	esentative of a				= N 23
Dated	CARMEN L MA	Signature o		authorized repre	esentative of a				: IIN 23 PM 2:

Filing Fee: \$25.00