

L12000044797

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

JAN 30 2013

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SPANISH FOR Sales Event Marketing LLC  
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:

RUTH I. TOMSICH  
Name of Person

Spanish For Sales Event Marketing LLC  
Firm/Company

770 PONCE DE LEON BLVD Suite # 303A  
Address

RT. CORAL GABLES, FL 33134  
City/State and Zip Code

Karem@spanishforsales.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUTH I TOMSICH at (305) 773-0736  
Name of Person Area Code & Daytime Telephone Number

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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 enclosed)      ☐ \$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

SPANISH FOR sales Event Marketing 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 4-02-2012 and assigned Florida document number L12000044797.

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)**

770 PONCE DE LEON Blvd  
Suite 303A  
Coral Gables, FL. 33134

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

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**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:**

RUTH I. TOMSICH

**New Registered Office Address:**

770 PONCE DE LEON Blvd # 303A  
*Enter Florida street address*

Coral Gables, Florida 33134  
*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 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.

x   
**If Changing Registered Agent, Signature of New Registered Agent**

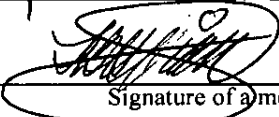
**MGR = Manager**  
**MGRM = Managing Member**

ST. LOUIS, MO. 63101  
TALLAHASSEE, FLORIDA

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated JANUARY 10, 2013



Signature of a member or authorized representative of a member

RUTH I TOMSICH

Typed or printed name of signee

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Filing Fee: \$25.00

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