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COVER LETTER

TO:

Registration Section Division of Corporations

INVERSIONES URBINA 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:

MICHELLE MARIE STAGNARO

Name of Person

INVERSIONES URBINA LLC

Firm/Company

120 SW 169TH AVE

Address

PEMBROKE PINES, FL, 33027

City/State and Zip Code

wilmaristi@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHELLE MARIE STAGNARO at (954) 433 - 6018

Name of Person

Area Code & Daytime Telephone 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 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

INVERSIONES URBINA LLC

(Name of the Limited Liability Company as it now appears on our records.)

(AT	·lorida Limited L	iability Company)	·			
The Articles of Organization for this Limited Lia Florida document number L12000048329	bility Company	were filed on April 09, 2	2012	and	d assign	ed
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	the limited liab	ility company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Company," the	designation "l	LLC" or	the abbi	eviation
Enter new principal offices address, if applical	ble:	Michelle Marie Stag	gnaro		20	
(Principal office address MUST BE A STREET		120 SW 169th Ave		14.5	رين «بري	. 4
		Pembroke Pines, FI	L, 33027		**	. ~
				4	Ö	-
Enter new mailing address, if applicable:				-	9 M	1 * 1
(Mailing address MAY BE A POST OFFICE B	OX)			35	Ñ	
				- -	+2	
B. If amending the registered agent and/or registered agent and/or the new registered offi Name of New Registered Agent:	ce address here		ords, <u>enter 1</u>	the nan	ne of t	he new
New Registered Office Address:	120 SW 169	9th Ave				
		Enter Flori	da street ada	lress		
	Pembroke F	Pines	, Florida <u>3</u> 3	3027		
		City	, <u>-</u>	Zip C	Code	
New Registered Agent's Signature, if changing Re	gistered Agent:					
I hereby accept the appointment as registered the provisions of all statutes relative to the proaccept the obligations of my position as registed being filed to merely reflect a change in the recompany has been notified in writing of this change in the c	oper and complered agent as p gistered office a lange.	ete performance of mydd rovided for in Chapter 60	ties, and i o 8, F.S. Or, mat the lin	am fami if this d nited lia	liar wit locume ability	th and

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michelle Marie Stagnaro	120 SW 169th Ave	Add
		Pembroke Pines, FL, 33027	Remove
MGR	Maria Nilda Urbina	120 SW 169th Ave	_
		Pembroke Pines, FL, 33027	Remove
MGRM	LEOPOLDO STAGNARO	120 SW 169th Ave	- _
		Pembroke Pines, FL, 33027	Remove
_			Add
		9. 	Remove
			. Se
			Remove
			Add

If amending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
	^
ted	
	Signature of a member or authorized representative of a member
	Michelle Marie Stay MAYO Typed or printed name of signee

Page 3 of 3

State of Florida Country of Broward

LAURA EGGNATZ TEPPERBERG
Commission # DD 936650
Expires December 9, 2013
Bondol flow from framewore 500 355-1019

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