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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration S Division of Co					
	INWORCA LLC				
SUBJECT:	Name of Lim	ted Liability Company	<u>-</u>		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MIRIAM SIFONTES				
		Name of Person			
	SIFONTES & ASSOCIAT	ES			
	6498 WEST 22 LANE				
		Address			
	HIALEAH FL 33016				
		City/State and Zip Code			
	inworcaimport@gmail.com			2010 TAL	
	E-mail address: (to be used for future annua	report notification)	2018 HOV	T.
For further information	concerning this matter, please c	all:		¥21	-
Lucelly Allarca		786 29	023322		1
Name	of Person	Area Code	Daytime Telephone Number	2	ş*· •
Enclosed is a check for	the following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	□ \$55.00 Filing Fee	& 🗆 \$60.00 Fili	ng Fee,	

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	INWORCA I					
(Name of the Limit	ed Liability Compar (A Florida Limited L	ny as it now appears on our liability Company)	records.)			
				and a	ssigne	d
Florida document number L12000049881	·					
This amendment is submitted to amend the follo	owing:					
A. If amending name, enter the new name of	f the limited liabi	lity company here:				
MONDIALE EXPORT &						
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designation	on "LLC" or th	e abbreviation	L.L.C."	
Enter new principal offices address, if applic	able:	<u> </u>				
(Principal office address MUST BE A STREE						<u>_</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	e following: me of the limited liability company here: RT & IMPORT LLC The words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." pplicable: REET ADDRESS) e: 3160 MUNDY STREET APT 307 MIAMI FL 33133 and/or registered office address on our records, enter the name of the new red office address here: 3160 MUNDY ST APT 307 Enter Florida street address MIAMI Florida 33133. 3					
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	ffice address here	<u>e</u> :	ecords, <u>ent</u>	ter the nam	2810	he nev
New Registered Office Address:	3160 MUNDY			- 1 11	_63 −	-
	MIAMI			33133	PH	
		City		Zip_Co	r the name of the new	
New Registered Agent's Signature, if changing	Registered Agent:			Şn.	63 (A)	

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>N</u> ame	Address	Type of Action				
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				11/15/201	Q.						
E. Effective da	te, if other tha	in the date o	of filing:			Gling or mor	than 90 days	optional)	Pursuan	t to 605	020
Note: If the	date inserted in	this block doe	es not mee	t the appli	cable statu	itory filing	requirements	this date	will not	be liste	ed as
uocument s e	effective date on	rtile Departiti	CIR OI Mar	e s record.	3.						
If the record s	specifies a de	elayed effec	ctive dat	e, but n	ot an eff	ective tir	ne, at 12:	01 a.m.	on the	earlie	er o
(b) The 90th											
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00