Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000005898 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC

Account Number: I20000000146 Phone

: (305)444-4994

Fax Number

: (305)444-4977

\*\*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 TELARES INGLESES C.A. LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. Burch JAN - 19. 2015

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TELARES INGLESE	ES Ç.A. LLC	
Nume of the Limited Liability Compa (A Florida Limited	env as it now appears on our records.) Lisbility Company)	
The Articles of Organization for this Limited Liability Company Florida document number L12000058511	were filed on 05/01/2012	and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	ulity company here:	15 JAN -8 SECRETAR ALLAHASS
The new name must be distinguishable and end with the words "Limited Liab	nility Company," the designation "LLC" or t	the Abbreviation (1.1 Com
Enter new principal offices address, if applicable:	141 NE 3RD AVENUE 8TH	ES T
(Principal office address MUST BE A STREET ADDRESS)	MIAMI , FL 33132	RAIV.
Enter new mailing address, if applicable:	141 NE 3RD AVENUE 8TH	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI , FL 33132	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	EVISA TIOLITIT 211561 (INCILCO)	
And the second s	, Florida	
	City	Zip Code
New Registered Apant's Signature of 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 Hability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	ALIRIO NOGUERA	141 NE 3RD AVENUE 8TH	
		MIAMI, FL 33132	□ Remove
			A COMPANDE MOVE
			ASSIC. FL
			ORD DANG
·····			□ Add
			Remove
<del></del>			
			☐ Remove

D. II	nending any other information, enter change(s) here: (Attach addit	tional sheets, if necessary.)	
<b>E.</b> E: (T: t	ctive date, if other than the date of filing:  ffective date must be specific, cannot be prior to date of receipt or filed date and cannot ate this document is filed by the Florida Department of State)	(optional) the more than 90 days after	
D	d 11/12 <b>2014</b>		•
<i>-</i>	MII		
	Signature of a member or authorized representative	e of a member	
	SR. ALÍRIO NOGUERA		
	Typęd or printed name of signee	SECRETARY ALLAHASSE	en manna
		PH 4:49 OF STATE EF. FLORIDA	

Page 3 of 3