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Office Use Only



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J. SAULSBERRY EXAMINER

MAY 16 2012

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

2012 SEZ
SECRETAN
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rt notification)
992-5742
Daytime Telephone Number
Certificate of Status & Certified Copy (additional copy is enclosed)
OURIER ADDRESS: Section Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RADIL				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)		
ne Articles of Organization for this Limited Liability Company were filed on05/07/2012			and a	assigned
Florida document numberL12000060875				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :		
N/A	\			
The new name must be distinguishable and end with the words "Limit" L.L.C."	ited Liability Comp	any," the designation	"LLC" or th	e abbreviation
Enter new principal offices address, if applicable:			<u></u>	·
Principal office address MUST BE A STREET ADDRESS)		N/A		
			75.	
			37.50	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:			F C 2	. [1]
(Mailing address MAY BE A POST OFFICE BOX)	1508 BAY R	D APT 963	95 9	> ()
Manning with the Mannin		CH, FL 33139		>
		,		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>ente</u>	r the name	of the new
egistered agent and/or the new registered office address ner	₹.			
Name of New Registered Agent:				
New Registered Office Address:	N/	A		
	Eı	Enter Florida street address		
		, Florida		
	City		Zip Ce	ode

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

MGRM = Managing Member **Type of Action** Title Address Name MGRM IGNACIO LECOUNA ARGENTINA ☐ Add Remove BUENOS AIRES AR ☐ Add Remove ☐ Add ☐ Remove Remove □Add Remove

77/15
<u> </u>
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and the second second

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

2012

MAY 9TH

Dated ___

Signature of a member or authorized representative of a member

∏Add ∏Remove

RAUL A LECOUNA SR.

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00