

L12000068880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

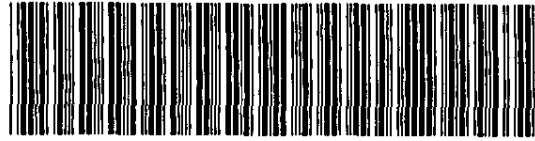
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800250083118

07/29/13--01041--027 \*\*55.00

FILED  
2013 JUL 29 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 30 2013

J. BRYAN

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Savannah Insurance Services 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:

Maria F Diaz CPA  
Name of Person

Maria F Diaz CPA  
Firm/Company

2250 NW 136 Ave  
Address

Pembroke Pines, FL 33028  
City/State and Zip Code

mdcpa@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria F Diaz CPA at (954) 499-2829  
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

FILED  
2013 JUL 29 PM 2:57  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2013 JUL 29 PM 2:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Savannah Insurance Services 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 May 22, 2012 and assigned Florida document number L12000068880.

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)

2893 Executive Park Drive  
Suite 201  
Weston, FL 33331

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Maria F Julian

New Registered Office Address:

15875 SW 17 ST

Enter Florida street address

Weston

City

Florida 33326

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 Maria F Julian  
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

Title	Name	Address	Type of Action
MGR	International Life Futuro Asegurado LC	2250 NW 136 Ave, Rembrock Pkwy Fl. 33028	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Latin American Reinsurance Intermediary Services Inc.	2893 Executive Park Drive Suite 201 Weston, Fl. 33331	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED  
 2013 JUL 29 PM 2:51  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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

---

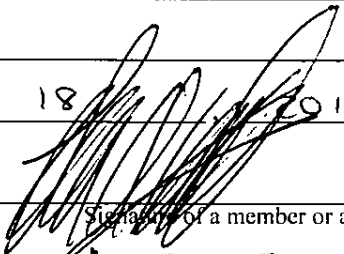
---

---

---

---

Dated June 18, 2013.

X 

Secretary of a member or authorized representative of a member

Luis Escobar

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

**FILED**  
2013 JUL 29 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA