

L12 0000 72166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

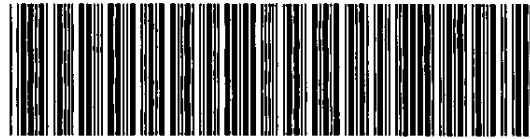
(Business Entity Name)

(Document Number)

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2014 JUN 16 AM 9:42
CLERK OF COURT
TALLAHASSEE, FLORIDA

↓ Stivers JUN 17 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

USPS - PRIORITY MAIL SERVICE
9405 5036 9930 0313 4508 81

SUBJECT: THE PACIFIC ALLIANCE GROUP USA 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:

Augusto Fernando Santiago

Name of Person

The Pacific Alliance Group USA, LLC

Firm/Company

6701 SW 116 Court, #104

Address

Miami, FL 33173

City/State and Zip Code

augustosantiago3@gmail.com

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

For further information concerning this matter, please call:

Augusto F. Santiago

Name of Person

at (786)

306-9434

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**

THE PACIFIC ALLIANCE GROUP USA 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 30, 2012 and assigned
Florida document number L12000072166.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

Augusto Fernando Santiago

New Registered Office Address:

6701 SW 116 Court, #104

Enter Florida street address

Miami

City

Florida

Zip Code

33173

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 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	GERMAN, Monica	8637 ESCONDIDO WAY EAST	<input type="checkbox"/> Add
		BOCA RATON, FL 33433	<input checked="" type="checkbox"/> Remove
MGR	SANTIAGO, Augusto Fernando	6701 SW 116 Court, #104	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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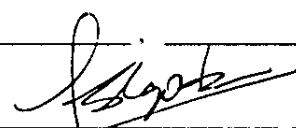
ALL INFORMATION CONTAINED
 HEREIN IS UNCLASSIFIED
 DATE 11-15-2011 BY 60322
 2011/11/15 14:00:00

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

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 06/09/2014



Signature of a member or authorized representative of a member

Manuel G. Santiago, MGRM

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 JUN 16 04 04:42
TALLAHASSEE, FLORIDA
SECRETARY OF STATE