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Certified Copies	_ Certificates	of Status
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K. SALY EXAMINER OCT -1 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

FEDERACION VENEZOLANA DE BALONCESTO LLC

SUBJECT:

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:

HUGO BRACHO

Name of Person

FEDERACION VENEZOLANA DE BALONCESTO INC

Firm/Company

3340 NE 190 ST

Address

AVENTURA, FL 33180

City/State and Zip Code

baloncestoinc@gmail.com

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

For further information concerning this matter, please call:

HUGO BRACHO

, ₍786₎488-9881

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	FILED
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)//4	E. FLORIDA

FEDERACION VENEZOLANA DE BALONCESTO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

,	7. Horida Emined Embinty Compar	•37	.
The Articles of Organization for this Limited		06/08/2012	and assigned
Florida document number L12000084940	<u> </u>		
This amendment is submitted to amend the following	llowing:		
A If amonding name enter the new serve	of the Bester Helitter account	la sacci	
A. If amending name, enter the new name	or the ninted hability company	<u>nere</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Co	mpany," the designation	"LLC" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE		ŧ.	
			
Enter new mailing address, if applicable:			
	S DAM		
(Mailing address MAY BE A POST OFFICE	<u></u>		
B. If amending the registered agent and	for registered office address o	n our records enter	the name of the name
registered agent and/or the new registered of		n our records, enter	the name of the new
Name of New Registered Agent:	HUGO BRACHO		
	3340 NE 190 ST		
New Registered Office Address:	Enter Florida street address		
		•	
	AVENTURA	, Florida <u>3</u>	
	City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	3	
I hereby accept the appointment as register the provisions of all statutes relative to the p	ed agent and agree to act in this	s capacity. I further ag ce of my duties, and I	gree to comply with

If Changing Registered Agent, Signature of New Registered Agent
Page 1 of 3

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 <u>Title</u> <u>Name</u> **Address Type of Action MGR** 10421 SW 157 PL SEGUNDO SALAZAR KENDALL, FL 33196 Remove **HUGO BRACHO** 5625 NW 109 AVE MGR **APT 59** Remove **DORAL, FL 33178** Remove Remove Remove Remove

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D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	change old email federacionVB@gmail.com for the new
•	email address: baloncestoinc@gmail.com
Dated	9/24 , $20/3$.
	Signature of a member of authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00