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SECRETARY OF STATE ALLAHASSEE, FLORIDA 12 AUG 20 PM 6: 2

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE UNITED CARIBBEAN ENTREPRENEURS GROUP, 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 Tong	2 29, 2012 and assigned
Florida document number 112000085571		•
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w"L.L.C."	words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Fnter :	Florida street address
	City	, Florida Zip Code
Non-Desistantia Assessa Classica (C.L., etc., Desista		

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 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> Name 1 **Type of Action Address** MICHEL F HYACINTHE MGRM PHILIPPE DUBOIS MBRM ☐ Add Remove Add 🔲 Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00