

Division of Corporations

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L12 0000695707Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H12000239530 3)))



H120002395303ABCZ

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CLARA GIRALDO, P.A.
Account Number : I19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098**FILED**
12 OCT -2 AM 8:13
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SERCOM USA, LLC.**

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B. KOHR

OCT 3 2012

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EXAMINER

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H12000239530

SERCON 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 07/24/12 and assigned
Florida document number L12000095707

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

CARDENAS DE ESCOBAR, NARLY

New Registered Office Address:

5610 NW 114 PL #202

Enter Florida street address

MIAMI

City

Florida

33178

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.

Signature of New Registered Agent

CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300

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

H120002395303

Title	Name	Address	Type of Action
MGR	SALAZAR, NAZLY CARDENAS	5610 NW 114 PL #202 MIAMI, FL 33178	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	TASCON, ALEXANDER	5610 NW 114 PL #202 MIAMI, FL 33178	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	CARDENAS DE ESCOBAR, NAZLY	5610 NW 114 PL #202 MIAMI, FL 33178	<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

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

Dated

OCTOBER 1, 2012

Signature of a member or authorized representative of a member

NAZLY CARDENAS DE ESCOBAR

Typed or printed name of signer