L12000102348

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JUN 26 PW 1: 4

C. LEWIS
JUN 27 2013
EXAMMER

COVER LETTER

TO: Registration Section
Division of Corporations

CURRECT: Valade I Investments 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:

Antoine Gendre

Name of Person

Wolkar LLC

Firm/Company

805 n andrews ave

Address

Fort Lauderdale FI 33311

City/State and Zip Code

antoinegendre@yahoo.com

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

For further information concerning this matter, please call:

Ivette Aries

ູ 954 530 1337

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 ORGANIZATIO

ARTICLES OF ORGANIZATION OF

(A Florida Limited Liability Company)

(Name of the Limited Liability Company as it now appears on our records I ANT UF STATE

ELLED

Valade I Investments LLC

13 JUN 26 PM 1: 43

TALLAHASSEE, FLORIDA

Zip Code

The Articles of Organization for this Limited Liability Company were filed on 08/09/2012 Florida document number <u>L12</u>000102348 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) 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: New Registered Office Address: Enter Florida street address

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.

City

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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address 13 JUN 26 PM 1: 43	Type of Action
MGR [.]	Michel Cecchin	805 The hard ave	Add
		Fort Lauderdale	Remove
		FI 33311	
MGRM	Valade Investissement	5 Allee Des Sources	✓ Add
		26120 Montelier	Remove
		France	
			Add
			Remove
			Add
 			Remove
			Remove
			Add
			Remove
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			Add
		· -	Remove

	(金田川)	-
	13 JUN 26 PM	- : 43
, -	SECRETARY OF STA TALLAHASSEE, FLOR	TE
_		-
Dated	June 24 , 80D .	

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Filing Fee: \$25.00