

Division of Corporations Electronic Filing Cover Sheet

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## ENTREPLATOS USA LLC

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September 5, 2013

FLORIDA DEPARTMENT OF STATE Division of Corporations

ENTREPLATOS USA LLC 175 FONTAINEBLEAU 1G-6 MIAMI, FL 33172US

SUBJECT: ENTREPLATOS USA LLC

REF: L12000122699

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Tammy Hampton Regulatory Specialist II

Registration/Qualification Section

FAX Aud. #: H13000196160 Letter Number: 213A00020908

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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STATE	29	

## **ENTREPLATOS USA LLC**

company has been notified in writing of this change.

(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 09/25/2012	and assigned
Florida document number L12000122699		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	9411 SW 112 Street	
(Principal office address MUST BE A STREET ADDRESS)	Miami, Fl. 33176	
Enter new mailing address, if applicable:	9411 SW 112 Street	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Fl. 33176	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	Enter Florida street ad	idress
	, Florida	
	Clry	Zip Code
New Registered Agent's Signature, If changing Registered Agent:	<u> </u>	
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my-position as registered agent as p	plete performance of my duties, and l	am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

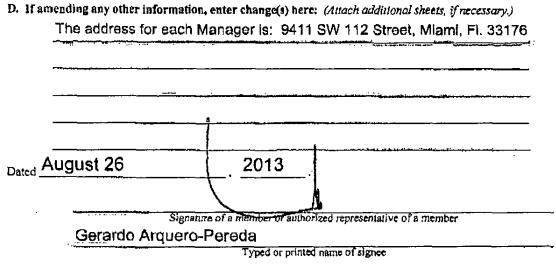
heing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

MGR = Manager

MGRM = Managing Member

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:

[ <del></del> [
Remove



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SECRETARY OF STATE