

MAY-10-2013 16:47 From:

To:18506176383

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Division of Corporations

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L12000136563

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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nc/Amnd

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

From: Account Name : VARGAS, PIEDRA & CO.
Account Number : I20070000148
Phone : (305) 671-0003
Fax Number : (305) 671-6263

FILED
MAY 10 2013
TALLAHASSEE, FLORIDA

2013 MAY 10 AM 9:05

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CSICARIBE L.L.C.**

Certificate of Status	0
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J. SAULSBERRY
EXAMINER

MAY 13 2013

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Corporate Filing Menu

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CSICARIBE L.L.C.

(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 OCTOBER 26, 2012 and assigned Florida document number L12000136563.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CSI CARIBE LLC

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)

16714 SW 99 CT.

MIAMI, FL 33157

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

16714 SW 99 CT.

MIAMI, FL 33157

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: PIEDRA & CO CPA

New Registered Office Address: 9100 S DADELAND BLVD STE 912

Enter Florida street address

MIAMI, Florida 33156

City

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.

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 = Manager

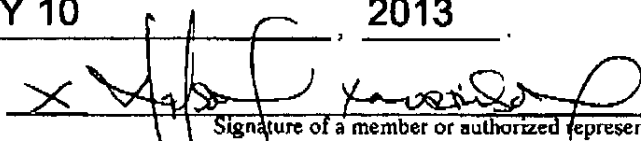
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANEURIS HERNANDEZ SR	2747 CARRICKTON CIRCLE ORLANDO, FL 32824	☐ Add ☒ Remove
MGRM	NELSON MORRISON SR.	2747 CARRICKTON CIRCLE ORLANDO, FL 32824	☐ Add ☒ Remove
MGRM	MORRISON & MORRISON INGENIEROS ASOCIADOS, SRL	16714 SW 99 CT MIAMI, FL 33157	☒ Add ☒ Remove
MGR	MORRISON, NELSON A.	16714 SW 99 CT MIAMI, FL 33157	☒ Add ☐ Remove
MGR	MORRISON, MILTON T.	16714 SW 99 CT MIAMI, FL 33157	☒ Add ☐ Remove
			☐ Add ☐ Remove

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

N/A

Dated MAY 10, 2013



Signature of a member or authorized representative of a member

NELSON A. MORRISON/MGR

Typed or printed name of signee

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FILED
2013 MAY 10 AM 9:05
U.S. DISTRICT COURT
MAY 10 2013