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(Re	questor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(D6	ocument Number)	
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer.	
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EFFECTIVE DATE 09-02-14

MIN SEP -2 P S 2.

B. BOSTICK

SEP - 8 2014

COVER LETTER

TO:	Registration Sec Division of Corp			
	1997	RNATIONAL INVESTM	ENTS USA LLC	
SUBJE	CT:	Name of Limit	ed Liability Company	<u> </u>
The enc	losed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please r	eturn all correspon	dence concerning this matter to	o the following:	
		JAIRO VARGAS		
			Name of Person	
		I&H INTERNATIONA	L INVESTMENTS USA LLO	C
			Firm/Company	
		6355 NW 36 ST SU	TE 401	
			Address	
		MIAMI, FL. 33166		
		JVARGAS1@GATE.N	City/State and Zip Code NET	cation) SEP - 2 P
		E-mail address: (to	be used for future annual report notific	cation)
For furt	her information co	oncerning this matter, please ca	11:	7 - 2 - 7
JAIR	O VARGAS	305 428-2	020	THE P ST
.,	Name of	Person		Telephone Number
Enclose	ed is a check for th	e following amount:		
□ \$25	5.00 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

TO ARTICLES OF ORGANIZATION OF

1&H INTERNATIONAL INVESTMENTS USA, LLC.

(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company were filed on Florida document number	/22/2013	_ and assigned
A. If amending name, enter the new name of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limited Liability Company," the c	designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	·en	
(Principal office address MUST BE A STREET ADDRESS)		
	_ `` j _ :s	SED SED
		2
Enter new mailing address, if applicable:	ું જે	T
(Mailing address MAY BE A POST OFFICE BOX)	LST.	άl
	Ę.	2
B. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	our records, enter th	e name of the
	ida street address	
	, Florida	
City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

If Changing Registered Agent, Signature of New Registered Agent

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.

Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DISGLA HERNANDEZ	6355NW 36 ST SUITE 401, MIAMI FL. 3	} ⊟ Add
			□ Remove
			□ Add
			□ Remove
			 □ Add
			_□ Remove
			_ _□ Add
			SEP =
		TY OF STATE	□ Add □
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			Add
			_□ Remove

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	09/02/2014	
Fective d	ate, if other than the date of filing:	(optional)
e effective	date must be specific, cannot be prior to date of receipt or filed date and car	nnot be more than 90 days after
	document is filed by the Florida Department of State)	
	28/2014	
ated	·	
	1	10
	Markey AM.	<i>7</i> 5
	17 00,00	, ,
_	Signature of a member or authorized represent	tative of a member
_	Signature of a member or authorized represent	tative of a member
-	Signature of a member or authorized represent	tative of a member

Page 3 of 3

Filing Fee: \$25.00

MIN SEP -2 P 5: 2.

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