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SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 APP _0 PM 2: 50

APR - 9 2013 T. HAMPTON

COVER LETTER

TO:

Registration Section
Division of Corporations

POSITANO INTL 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:

ROMULO JULIO LAZZARI

Name of Person

POSITANO INTL LLC

Firm/Company

2380 SW 80 CT

Address

MIAMI, FL 33155

City/State and Zip Code

XIOLEE@AOL.COM

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

For further information concerning this matter, please call:

ROMULO JULIO LAZZARI

 $_{at}(305)262-2323$

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 ORGANIZATION OF

POSITANO INTL 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 02/28/2013	and ass	igned
Florida document number L13000031109	- 13	SEIVIO 6
	APR	ISCR CR CR CR
This amendment is submitted to amend the following:	₹ - 8	EFAR OF FI
A. If amending name, enter the new name of the limited liability company here:	PH	ED NY OF S CORPOR
	2:	RAT
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LL	.C" or the a	byeviation
'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, <u>enter the registered agent and/or the new registered office address here:</u>	e name o	f the new
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida street addre	?ss	-

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

Zip Code

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>	Address	Type of Action
MGR	JUAN F LITTA	2380 SW 80 CT FL 3315	5
			Remove
MGR	ROMULO JULIO LAZZARI	2380 SW CT FL 33155	Add
			Remove
			Add
			Remove
			Ab Diage Orace Ab
			RETURN OF STATE OR POR AT A PH 3:
			Remove
			Add
			Remove

Ifame	ılding any other in	nformation, enter change(s) here: (Attach additional sheets, if necessary)
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ted	Mmeh	27,, 2013	
		Signature of a member or authorized representative of a member	
		ROMULO JULIO LAZZARI	
		Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00