L130000 47242

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COVER LETTER

TO:	Registration Se Division of Cor			
		ORIDA SALES EXPERTS LI	LC . *	·
SOR	JECT:	Name of Lim	ited Liability Company	
The	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	se return all correspo	ondence concerning this matter	to the following:	
		LUIS FRANCISCO BARI	BIERI	
			Name of Person	
		SOUTH FLORIDA SALE	S EXPERTS LLC	
			Firm/Company	
		6055 NW 105TH CT APT	• •	
		*	Address	
		DORAL FLORIDA 33178		
		FBARBIERI@LACASA33	City/State and Zip Code .COM	
		E-mail address: (to be used for future annual report notif	ication)
For I	further information c	oncerning this matter, please ca	all:	
LUI	S FRANCISCO BAI	RBIERI	786 7201989	
	Name o	f Person		Telephone Number
Encl	osed is a check for the	he following amount:		
	\$25.00 Filing Fee	S30.00 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

SOUTH FLORIDA SALES EXPERTS LLC

	_
(Name of the Limited Liability Company as it now appears on bur records.)	
I Name of the Limited Lianuity Company as it now appears/on/our records. 1 2-2 (2)	
(transe of the 13thrives thanking Company as it now appears the same of the	
(A Florida Limited Liability Company)	
A CHOTON LIMITOR LINDRALY COMPANY I	

The Articles of Organization for this Limited Liability Company vi Florida document number L13000047242	were filed on 04/01/20	013 and assigned	
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company bere:		
LA CASA33.COM USA LLC			
The new name must be distinguishable and contain the words "Limited Liabilia	y Company," the designation	ation "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 off registered agent and/or the new registered office address here		r records, <u>enter the name of the r</u>	<u>ięw</u>
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida st	treet address	
		, Florida	
	City	, Florida 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
			□ Add
			☐ Remove
			Change
			□ Remove
			☐ Change
			□ Add
			□ Remove
		 	☐ Change
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			Add
			☐ Remove

_ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	02/01/2019
(li`an eff <u>Note:</u>	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	JANUARY 31 , 2019
	Signature of a member or authorized representative of a member
	LUIS FRANCISCO BARBIERI

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Typed or printed name of signee

Filing Fee: \$25.00