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JUL 22 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BENDA DE VENE EVELA 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: JUAN C DIA 7 Name of Person Name of Per
JODZI GULP CENTER Dr. G-200 Address
10021 Gulp Center Dr. G-200 Address
Fort Myers FL 33913 City/State and Zip Code jcdintServices@msn.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Juan C Diaz at (239) 938-5601 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section STREET/COURIER ADDRESS: Registration Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	VENEZUELA	UC
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appear Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Of Florida document number <u>LJ300005780</u>	Company were filed on <u>6</u>	94/19/2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company her	<u>'e</u> :
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Compa	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	PSE TO THE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		LETARY OF STATE
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	En	ter Florida street address
		, Florida
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Hentor	Ricardo J Diez		Add
			Remove
		SECAL SECAL	Add Add
		် ကို	Add
			Add FLORIDE STATE
			_ Add
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			Remove
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am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
•	
	
	7/15/2013
	Signature of a member of authorized representative of a member
	JUAN C DIAZ
	Typed or printed name of signee
	D 2 62

Page 3 of 3

Filing Fee: \$25.00

