

L13000059601

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000092686 3)))



H130000926863ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : LISETTE PIE SALAZAR PA
Account Number : I20120000076
Phone : (305) 361-6161
Fax Number : (305) 361-6168

FILED
13 APR 24 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****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
ENJASCO LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED
13 APR 24 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 25 2013

B. KOHR Electronic Filing Menu Corporate Filing Menu Help

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

ENJASCO 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 4/23/2013

and assigned

Florida document number L13000059601

FILED
13 APR 24 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

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)

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, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter 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

Fax:

Apr 24 2013 02:20pm P003

H13000092686 3

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	Enrique Raul Scotto Cueto	520 Brickell Key Drive	☒ Add
		Suite A619	☐ Remove
		Miami, FL 33131	
MGRM	Javier Ignacio Scotto Cueto	520 Brickell Key Drive	☒ Add
		Suite A619	☐ Remove
		Miami, FL 33131	
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

Fax:

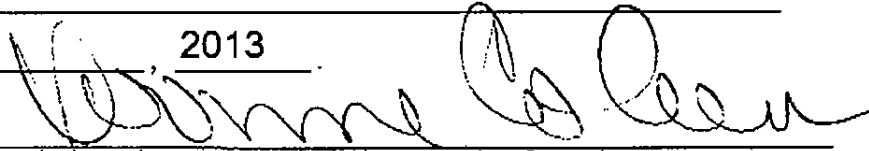
Apr 24 2013 02:20pm P004

H13000092686 3

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

Dated April 24

2013



Signature of a member or authorized representative of a member

Ivonne Cohen

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

H13000092686 3