# 11300066102

(Re	equestor's Name)	
(Ád	ldress)	
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(Cir	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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DEC 27 2017 SUILKER



December 12, 2017

KATIUSKA VEGAS 2527 BAY POINTE CT WESTON, FL 33327

SUBJECT: INVEPA INTERNATIONAL LLC

Ref. Number: L13000066102

We have received your document for INVEPA INTERNATIONAL LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 417A00025114

# **COVER LETTER**

	NTERNATIONAL		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	Katiuska Vegas		
	-	Name of Person	
	Invepa International		
		Firm/Company	***
	2527 Bay Pointe Ct		
		Address	
	Weston Fl. 33327		
	<del></del>	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	kvegas@invepainternational		
	E-mail address: (t	o be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	II:	
Katiuska Vegas		954 5051627	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section Division of Corporations

> 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

INVEPA INTERNATIONAL 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 \_\_05/06/2013 and assigned Florida document number 1.13000066102 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 registered agent and/or the new registered office address here: Roberto Maurant Name of New Registered Agent: 2527 Bay Pointe CT New Registered Office Address: Enter Florida street address

### 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.

City

Weston

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Carlos J. Vegas	2527 BAY POINTE CT WESTON	
		F1, 33327	■ Remove
			☐ Change
MGR	Katiuska Vegas	2527 BAY POINTE CT WESTON	<u></u> ⊟ Add
		FI. 33327	Remove
			Change
AMBR	Carlos J. Vegas	2527 Bay Pointe Ct Weston	<u> </u>
		Fl, 33327	AHASSET Manove
			S 32 D
AMBR	Katiuska Vegas	2527 Bay Pointe Ct Weston	RIDA S
		FI 33327	Remove
			Change
			Add
			□ Remove
			Change
		-	Add
			Remove
			☐ Change

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Dated	. <u>-</u>			<u>-,                                    </u>		. •						
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00