L13000087131

(Re	equestor's Name)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

9-19-13

(proposit

COVER LETTER

TO: Registration Section
Division of Corporations

• •

Bramex Enterprise 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:

Odijas Caminha

Name of Person

OGC Associates PA

Firm/Company

245 S Military Trail

Address

Deerfield Beach, FL 33442

City/State and Zip Code

ogc@ogcfinancial.com

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

For further information concerning this matter, please call:

Odijas Caminha

_.,954、708-2817

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

Olamex Enterprise LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on June 17, 2013	and a	ssigned
Florida document number L13000087131		-	<u> </u>
This amendment is submitted to amend the following:		3 SEP 1.7	SECRETA VISION OF
A. If amending name, enter the new name of the limited liab	oility company here:		
		P	중위 C
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LL	C., bΩthe	e abbreviation
Enter new principal offices address, if applicable:	6984 Collins Ave		
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33141		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6984 Collins Ave Miami Beach, FL 33141		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		e name	of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addre	288	
	, Florida		
	City	Zip Co	de

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 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 **Title** <u>Name</u> <u>Address</u> **Type of Action** Remove Add Remove Remove Add

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
_	
_	
ated	September 13 2013
	And the second s
	Signature of a member or authorized representative of a member
	Alejo Carbajal
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

13 SEP 17 PN 2: 29