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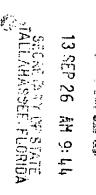
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COVER LETTER

TO: Registration Section

Division of Corporations

MCRA USA INVESTMENTS, 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:

Antonio L. Roca, Esq.

Name of Person

ROCA GONZALEZ, PA

Firm/Company

2601 S. Bayshore Drive, Suite 725

Address

Miami, FL 33133

City/State and Zip Code

CKAHL@RGPA.COM

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

For further information concerning this matter, please call:

Carolyn Kahl

{.,/}305\859-6050

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

MCRA USA INVESTMEN			
(<u>Name of the Limited</u>	I Liability Company as it i A Florida Limited Liability (now appears on our records.) Company)	
The Articles of Organization for this Limited I	iability Company were fi	led on 06/28/2013	and assigned
Florida document number L13000093234	 •		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability cor	npany here:	
The new name must be distinguishable and end w "L.L.C."	th the words "Limited Liab	ility Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	cable:	C.	
(Principal office address MUST BE A STREET ADDRESS)			[C & 1/24
			del sign
		, , , , , , , , , , , , , , , , , , ,	A B. TY
Enter new mailing address, if applicable:	•	£	
(Mailing address MAY BE A POST OFFICE BOX)		(2 4 m
			5 m 2-
B. If amending the registered agent and registered agent and/or the new registered of		dress on our records, <u>enter t</u>	he name of the nev
Name of New Registered Agent:	RGPA Registered	d Agent, Corp.	
New Registered Office Address:	2601 South Bays	hore Drive, Suite 725	
		Enter Florida street add	
	Miami, FL	, Florida <u>3</u> 3	133
	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

Page 1 of 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> **Address** Name **Type of Action** MARIO LAI 900 BISCAYNE BLVD., TH 1105 MGMR MIAMI, FL 33132 Remove **MARIO LAI** MGR 2601 S. Bayshore Dr. Suite 725 MIAMI, FL 33133 Remove Add Remove Remove

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
• _	
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ıted	September 19, 2013.
	Signature of a member or authorized representative of a member MARIO LAI
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SEVERANCE FOR THE SECONDARY