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EXAMINER

AUG 08 2013

COVER LETTER

	Name of Limit	ed Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Jose Heredia, Industrial N	Material & Equipment Inc., Managi	ng Member	
		Name of Person	**************************************	
	IMEQ LLC			
		Firm/Company		
	8620 NW 64	Street Bay 15		
		Address		
	Maimi, Florid	a 33166		2017
City/State and Zip Code				2013 AUG
jheredia@imequsa.com E-mail address: (to be used for future annual report notification)				ovy en
	·	•	ion)	7
For further information	concerning this matter, please ca	ll:		
Jose Hered	dia	305 470 010	0	9. 5
Name	of Person	Area Code & Daytime T	elephone 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	□\$60.00 Filing	; Fee, of Status &

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

IMEQ, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabil Florida document number <u>L13000102054</u>		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
		(T.O)
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company," (he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	7. 2015
(Principal office address MUST BE A STREET A	DDRESS)	
		A A
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	<u> </u>
		7 10
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida 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 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>	Name	Address	Type of Action
*****	·		Add
			Remove
			Add
			Remove
			Remove
			Add 2013 Remove
			Remove:
			Add 55
			Remove
	<u> </u>		Add
			Remove
			Add
			Remove
		 	Remove

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

This is an amendment to Article VI herewith adding as an additional

authorized representative of the managing member the person of

Gloria Maria Cabrera and her address is 8620 NW 64 Street

Bay 15, Maimi Florida 33166.

Dated July 29

2013

Signature of a member or authorized representative of a member

Jose Heredia

Typed or printed name of signee

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Filing Fee: \$25.00

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