113000138210

(Requestor's N	Name)
(Address)	
(Address)	
(City/State/Zip	/Phone #)
PICK-UP WA	AIT MAIL
(Business Ent	ity Name)
(Document Nu	ımber)
Certified Copies Cert	ificates of Status
Special Instructions to Filing Offic	er:

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SECRETARY OF STATE

AUG - 6 2015 T. HAMPTOR

COVER LETTER

ТО	P: Registration Sec Division of Corp	tion orations		•
CII		E PH-3 LLC		
30	BJECT:	Name of Limit	ted Liability Company	
Th	e enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Ple	ease return all correspor	dence concerning this matter t	o the following:	
		LUIS R. SMITH		
		**************************************	Name of Person	
		JESSEL INVESTMENTS I	LLC	
			Firm/Company	
		11402 NW 41ST STREET	SUITE 211	
			Address	
		DORAL, FL 33178		
			City/State and Zip Code	
		LM.JESSEL@GMAIL.CON		
			o be used for future annual report notific	ation)
Fo	r further information co	oncerning this matter, please ca	Л:	
LU —	JIS R. SMITH		305 4702429 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
En	closed is a check for th	e 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

914 6	
da Limited Liability Company)	ecorus.
Company were filed on 10/01/2013	and assigned
mited liability company here:	
imited Liability Company," the designation '	"LLC" or the abbreviation "L.L.C."
difference of the second	
DRESS)	75 J
	CRETARY OF STATE
gistered office address on our rec <u>ldress here</u> :	cords, enter the name of the
Enter Florida street a	uddress
2,772, 2 10, 10th 511 CD 12	
	, Florida
<u></u>	nited liability company here: mited Liability Company," the designation ORESS) istered office address on our rec

New Registered Agent's Signature, it 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.

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>	Address	Type of Action
MGR	R & S INTERNATIONAL INC	WITHFIELD TOWER	. ■ Add
		THIRD FLOOR, 4792 CONEY DR	☐ Remove
		P.O BOX 1777, BELIZE	Change
			Add
			☐ Remove
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fective date, if other than than effective date is listed, the date materials of the date inserted in this becoment's effective date on the I	block does not meet ti	he applicable si	of filing or more tha latutory filing requ	(optional) n 90 days after filing.) I trements, this date w	Pursuant to 605 0207 ill not be listed as
record specifies a delaye The 90th day after the re	ed effective date, cord is filed.	but not an	effective time,	at 12:01 a.m. o	n the earlier of
ited July 27	20	15			
	,				
	_ {	82			
	Signature of a memb	er or authorized	representative of a m	ember	

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SECRETARY OF STATE