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SECRETARY OF STATE
ALLAHASSEE FLORE

NOV - 4 2013

T. BROWN

COVER LETTER

Division of Cor	porations	**	
SUBJECT: ALC	OR Internationa	- 1	16;
•	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Al	ex Gonzalez	
	ALOR I	nternational, L.L.C	•
	7156 Ball	antrae Court	
	Miam: L	akes, FL 33014	
	alex.gon	City/State and Zip Code Caleze alormachinery of the state of the stat	
For further information co	oncerning this matter, please c	ali:	
Alex Gonza	lez	at (786) 295-16:	59
Name of	f Person	Area Code & Daytime Te	elephone Number
Enclosed 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

TO:

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

ALOR International, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

records.) Files

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limi		
ALOR Machinery, L		
The new name must be distinguishable and end with the word L.L.C."	ds "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Hialech, F	achinery, L.L.C. 22333 L 33002
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter I	Florida 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Mar MGRM = M	nager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
•			Add
			Remove
	 		Add
			Remove
	•		Add
			Remove
			Add
			Remove
			_
			Add
			Remove
			Add
			Remove

. If an	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	,
ated _	October 29 2013 Oly Gyly

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Filing Fee: \$25.00