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Division of Corporations Fax Number : (850) 617-6383

From:

: LEGALZOOM.COM INC. Account Name

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THONET & VANDER USA LLC

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Help

From:

02/19/2014 21:11

\$#639 P.001/008

## **COVER LETTER**

TO:	Registration Section
	Division of Corporations

THONET & VANDER USA LLC SUBJECT: 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: Cheyenne Moseley Name of Person Legalzoom.com, Inc. Firm/Company 100 W. Broadway Suite 100 Address Glendale, CA 91210 City/State and Zip Code mariana@quadratica.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 962-8600 ext 7950 Imelda Vasquez Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ■ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

> MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

STREET/COURIER ADDRESS:

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(additional copy is exclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT OŢ ARTICLES OF ORGANIZATION OF

## THONET & VANDER USA LLC

(Name of the Elmited	Liability Compa Florida Limited L	ny as it now appears on our r liability Company)	ecords.)	第二 至	0
The Articles of Organization for this Limited Liab Florida document number L13000153933	oility Company	were filed on 11/01/201	3	and assigned	3
This amendment is submitted to amend the follow	ing:	7 W 174 W		CW.	
A. If amending name, enter the new name of t	he limited liabi	lity company here:			
The new name must be distinguishable and end with the wo	rds "Limited Lish	ility Company," the designatio	n "LLC" or the abbre	viation "L.L.C."	-
Enter new principal offices address, if applicab	ile;	5121 NW 79th Ave. I	Jnit 5		
(Principal office address MUST BE A STREET		Miami, FL 33166			_
B. If amending the registered agent and/or registered agent and/or the new registered office.  Name of New Registered Agent:	registered of se address here			name of the	new
New Registered Office Address:	13302 Windi	ng Oak Court Suite A	• ,		•
New Registered Office Address.		Enter Florida street o	nddress		-
	Tampa		, Florida 3361	2 <sup>.</sup>	
		City		Zip Code	_
New Registered Agent's Signature, if changing Re-	gistered Agent;				
Thereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this ch	and complete ered agent as p gistered office pange.	performance of my duth provided for in Chapter address I hereby confir Che	es, and I am fam 1605, F.S. Or; if t im that the limite yenne Moseley, a lift of United State	iliar with and his document is a liability ssistant secretar s Corporation Ag	i y.on

Page 1 of 3

From:

To:

02/19/2014 21:12

#639 P.003/008

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGRM	RICARDO BRAVO	2628 NW 97TH AVE. MIAMI, FL 33172	D Add
			Remove
AMBR	Alejandra Lombardini	5121 NW 79th Ave. Unit 5	<b>=</b> Add
		Mlami, FL 33166	□ Remove
AMBR	Alejandro Liera	5121 NW 79th Ave. Unit 5	<b>S</b> Add
		Miami, FL 33166	□ Remove
	•		_
			□ Add □ Remove
			_
<del>, , , , , , , , , , , , , , , , , , , </del>			Add
		, <u></u>	□ Remove
			D Add
			C Remove
			<del></del>

Pe	90	8	Of	G

2/20/2014 1:47:15 PM PST

13239628300 From; Amende Sando

From:	02/19/2014 2	21:12 #8	639 P	.004/008
D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if ne	ecessary.)		
<u></u>				
		Och - Town - TWO-b		
	date, if other than the date of filing:  (op //e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 day is document is filed by the Florida Department of State)	i <b>tional)</b> ys after		
Dated	2/19 , 2014.			
	Signature of a member or authorized representative of a member	······································		
	RICARDO BRAVO			
	Typed or printed name of signee			

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Filing Fee: \$25.00