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COVER LETTER

Division of Cor	porations		
SUBJECT:	DESTINATION MAT	TE LLC	
SUBJECT,	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JOSE ALFONSO BE	ERTHIER	
		Name of Person	
		Firm/Company	
	5750 COLLINS AVE	NUE APT 16J	
		Address	
	MIAMI BEACH, FL	33140-2313	
	alfonso@latinbag.co	City/State and Zip Code m	······································
	E-mail address: (to be used for future annual report notificati	on)
For further information c	oncerning this matter, please ca	all;	
JOSE ALFONSO E	BERTHIER	202 351-2205	
Name o	f Person	at () Area Code Daytime Tel	ephone Number
Enclosed is a check for the	ne 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

TO ARTICLES OF ORGANIZATION OF

DESTINATION MATE LLC		
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limited Liab	, , ,,	reviation "L.L.C."
Enter new principal offices address, if applicable:	JOSE ALFONSO BERTHIER	
(Principal office address MUST BE A STREET ADDRESS)	5750 COLLINS AVENUE APT 1 MIAMI BEACH, FL 33140-2307	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	IVITAIVII BEACH, FL 33 140-2307	FEB 23 PH II: 0
B. If amending the registered agent and/or registered oregistered agent and/or the new registered office address her		e name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	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 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

Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MEMBI MOONLIGHT INV	MOONLIGHT INVESTMEN	175 SW 7ST SUITE 1900	□ Add		
		MIAMI, FL 33130			
			■ Remove		
			□ Add		
			Remove		
			7		
			SECRETE ASSE		
			23 Francisco (1980)		
		-	Remove Re		
			Add		
			Adu		
			□ Remove		

			Remove		
			□ Remove		

	JOSE ALFONSO BERTHIER PURCHASED TO MOONLIGHT INVESTMENT	·s		
	LLC 50% OF THE SHARES FOR THE AMOUNT OF \$3,500.00			
	ON MARCH 01, 2014 .			
				
(The e	ctive date, if other than the date of filing: "ffective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State) MARCH 01, 2014 (optional)			
uicu	JANUARY 26 2015			
Date	.d			
	Signature of a member or authorized representative of a member			
	JOSE ALFONSO BÉRTHIER	$\overline{A}'_{i,c}$		
	Typed or printed name of signee	ECRETARY OF STAT	15 FEB 23 PH L: C	
		<u>5.7</u>	<u>ე</u>	

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Filing Fee: \$25.00