13000155151

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
. (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200311573142

04/12/18--01027--005 **25.00

FILED

18 APR 12 AN 2: 09

SECRETARY OF STATE
SECRE

O SIMMONS

APR 1 ~ 2018

COVER LETTER

	gistration Se ision of Cor				
OUD IDOX		NCE USA LLC			
SUBJECT:	Name of Limited Liability Company				
		Amendment and fee(s) are sub-			
	·	Jeffrey C Weinstein			
			Name of Person		
Mittenthal Weinstein LLP					
Firm/Company					
3100 S Federal Highway, Suite B					
			Address		
		Delray Beach, FL			
			City/State and Zip Code		
Weinstein@mw-attorneys.com E-mail address: (to be used for future annual report notification)					
For further i	nformation c	oncerning this matter, please ca		out.	
Jeffrey C W			561 862-0955 at ()		
	Name o	f Person		Telephone Number	
Enclosed is	a check for th	ne following amount:			
K \$25.00 I	Filing Fee	S30:00 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

ETS FINANCE USA LLC		1- \ \ -	
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our record Liability Company)	<u>15.</u>)	
The Articles of Organization for this Limited Liability Company	were filed on 11/04/2013	and assigned	
Torida document number L13000155151			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
d			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	160 W. Camino Real		
Principal office address MUST BE A STREET ADDRESS)	Suite 186		
	Boca Raton, FL 33432	7 7 77 77	
Enter new mailing address, if applicable:	160 W. Camino Real		
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	Suite 186		
	Boca Raton, FL 33432	\$ F P	
		<u> </u>	
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		s, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		orida	
	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 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>	<u>Address</u>	Type of Action
MGR	CORADIN LAW PA	200 S. Biscyane Blvd, Suite 2790	
		Miami, FL 33131	■ Remove
			□ Change
MGR	SPARING PARTNERS 2 INC	33 SE 4th Street Suite 100	Add
		Boca Raton, FL 33432	Remove
			Change
· — :			Add
			□ Remove
			Change
			Add PRemove
			Change Change Add
			☐ Remove
		 	Change
			Add
			□ Remove
			☐ Change

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
. •		
		
•		
		
	- PR	
		THE D
		<u>7:</u> 09
		
		
		
T. 1244		
(If an ef <u>Note:</u>	tive date, if other than the date of filing:	to 605.0207 (3)(to e listed as the
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e 90th day after the record is filed.	earlier of:
Dated	d November 28 , 20PT.	
	Signature of a member or authorized representative of a member	_
	HERVE VALETTE, Member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00