

U3000174862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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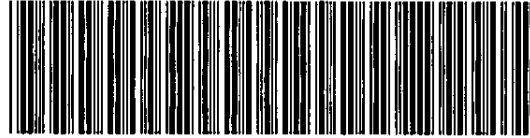
(Business Entity Name)

(Document Number)

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15 OCT 13 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 14 2015
S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IGMASA MANAGEMENT USA LLC

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:

SONIA CAPDEFERRO

Name of Person

IGMASA MANAGEMENT USA, LLC

Firm/Company

175 SW, 7th Street, Unit 2006

Address

Miami, Florida 33130

City/State and Zip Code

s.capdeferro@igmasa.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SONIA CAPDEFERRO

305 320 38 74

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the 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**

IGMASA MANAGEMENT USA LLC

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

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 28 2015 and assigned
Florida document number L13000174862

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter 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 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>	<u>Type of Action</u>
MGR	IGNASI MAESTRE	MALLORCA 245 7-2,	<input type="checkbox"/> Add
		08008 BARCELONA, SPAIN	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SONIA CAPDEFERRO	RB. CATALUNYA 91-93 4° 1°	<input type="checkbox"/> Add
		08008, BARCELONA, SPAIN	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	CAROLINA LUQUE	RB. CATALUNYA 91-93 4° 1°	<input checked="" type="checkbox"/> Add
		08008, BARCELONA, SPAIN	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
OCT 13 2011
FBI - SEATTLE

[illegible]

FILED
OCT 13 1992
Pursuant to 605.0207
it will not be listed as

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 28 2015

SONIA CAPDEFERRO on behalf of Member

Filing Fee: \$25.00