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COVER LETTER

TO: Registration Se Division of Cor	
SUBJECT: USA	Gestiones, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
	Luis Miguel Poyato Molina
	Name of Person
	USA Gestiones, LLC
	Firm/Company
	1900 N Bayshore Drive, Suite #3515
	Address
	Miami, Florida, 33132
	City/State and Zip Code
	liw53@hotmail.com E-mail address: (to be used for future annual report notification)
Ear further information a	
	oncerning this matter, please call:
Luis Miguel	Poyato Molina 🗼 305 9656948
Name o	f Person Area Code Daytime Telephone Number
Enclosed is a check for th	ne following amount:
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

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

Certified Copy

(additional copy is enclosed)



August 6, 2014

LUIS MIGUEL POYATO MOLINA 1900 N BAYSHORE DRIVE STE 3515 MIAMI, FL 33132

SUBJECT: USA GESTIONES LLC Ref. Number: L14000014681

We have received your document for USA GESTIONES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 114A00016763

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

USA GESTIONES 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 Liz Florida document number L14000014681	ubility Company v	were filed on <u>01/28/2</u>	2014	and assig	gned
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabil	lity company here:			
The new name must be distinguishable and end with the w	ords "Limited Liabil	lity Company," the designati	on "LLC" or the abbrev	iation "L.	L.C."
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREET	[ADDRESS)		·		·
				7	
			A A	AUG	
Enter new mailing address, if applicable:			AS	9 19	
(Mailing address MAY BE A POST OFFICE E	POV)		M -	_ _ _	3
Mulling uturess MAT BE A FOST OFFICE E	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			<u> </u>	'M' .
B. If amending the registered agent and/oregistered agent and/or the new registered off			ecords, enter the	デ あ name o	of the new
Name of New Registered Agent:	Luis Migue	l Poyato Molina			
New Registered Office Address:	1900 N Ba	yshore Drive, Su Enter Florida street			
	Miami		, Florida <u>3313</u> 2	2	
		City	, FIOTI UA	p Code	
New Registered Agent's Signature, if changing R	egistered 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

Page 1 of 3

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	POYATO MOLIMA LOUIS M	1900 NORTHBAY SHORE DR. APT. 4006	🗆 Add
		MIAMI, FLORIDA, 33132	Remove
AMBR	HERRERA CARLOS A	1900 NORTHBAY SHORE DR. APT. 4006	
		MIAMI, FLORIDA, 33132	■ Remove
MGR	LUIS M. POYATO MOLINA	1900 N BAYSHORE DRIVE	Add
		SUITE 3515, MIAMI, FLORIDA, 33132	□ Remove
MGR	CARLOS A. HERRERA MONTERO	1900 N BAYSHORE DRIVE	A dd
		SUITE 3515, MIAMI, FLORIDA, 33132	□ Remove
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Filing Fee: \$25.00