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COVER LETTER

TO:

Registration Section Division of Corporations

ASIA NATIONAL LEADING MACHINES 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:

Anabella Perello-Querales

Global Trust Management

1600 Ponce de Leon Blvd. Ste. 808

Address

Coral Gables, FL, 33134

City/State and Zip Code

aperello@globaltrustm.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anabella Perello-Querales at (305) 3795551 Name of Person 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

ASIA NATIONAL LEADING MACHINES 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 Liabilit	ty Company were filed on February 6, 2014 and assigned
Florida document number <u>L14000021165</u>	·
This amendment is submitted to amend the following	<u>;</u> :
A. If amending name, enter the new name of the	limited liability company here:
ASIA NATIONAL LEADING MACHI	NES (ANALEMA) LLC
	"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 AD	
Tracipal office maress most ble A STREET AD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	<u></u>
	egistered office address on our records, enter the name of the new
registered agent and/or the new registered office a	address here:
Name of New Registered Agent:	AS 14
Now Desistered Office Address.	AHL THE
New Registered Office Address:	Enter Florida street address (2) N
	City Florida C Zip Code
No Bodies of Control of the Control	97 7
New Registered Agent's Signature, if changing Regist	ered Agent:
	ent and agree to act in this capacity. I further agree to comply with the
	ad complete performance of my duties, and I am familiar with and
	d agent as provided for in Chapter 605, F.S. Or, if this document is tered office address, I hereby confirm that the limited liability
company has been notified in writing of this chan	

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove

			Add
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			□ Remove
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			E.F. ORIDA
			□ Remove
			Add
			☐ Remove

).	If amending any other information, enter c	change(s) here: (Attach additional sheets, if necessary.)
		
	-	
1	Effective date, if other than the date of filin The effective date must be specific, cannot be prior to do the date this document is filed by the Florida Departme	ng: (optional) late of receipt or filed date and cannot be more than 90 days after ent of State)
	Dated March 6	2014
	Twite -	
	Ivanni Patino	a member or authorized representative of a member
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

