# L14 0000 25959

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
|                         |                    |           |
| (Ac                     | ddress)            |           |
|                         |                    |           |
| (Ac                     | ddress)            |           |
|                         |                    |           |
| (Ci                     | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
|                         |                    |           |
| (Bı                     | usiness Entity Nan | ne)       |
|                         |                    |           |
| (Do                     | ocument Number)    |           |
|                         |                    |           |
| Certified Copies        | _ Certificates     | of Status |
|                         |                    |           |
| Special Instructions to | Filing Officer.    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    | ı         |
|                         |                    |           |
|                         | æ                  |           |
|                         |                    |           |

Office Use Only



300260097433

05/14/14--01024--011 \*\*25.00



A SENTING MAY 2 1 2014

## COVER LETTER

TO:

Registration Section
Division of Corporations

### TIQUE PAY LLC

SUBJECT:

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:

### Octavio Cardoso

Name of Person

## Notlya Holdings Corporation

Firm/Company

21301 Powerline Rd #207

Address

Boca Raton, FL 33433

City/State and Zip Code

cardoso@westchesterintl.com

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

For further information concerning this matter, please call:

#### Octavio Cardoso

, <u>561</u>, <u>488-8048</u>

Name of Person

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

| TIQUE PAY LLC                                                                                                                                                                                      |                                        |                                                                                           |                                                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| (Name of the Limit                                                                                                                                                                                 | (A Florida Limited L                   | ny as it now appears on our records.)<br>Liability Company)                               |                                                                    |
| The Articles of Organization for this Limited L Florida document number L1400002595                                                                                                                | iability Company                       | were filed on 02/14/2014                                                                  | and assigned                                                       |
| This amendment is submitted to amend the following                                                                                                                                                 | owing:                                 |                                                                                           |                                                                    |
| A. If amending name, enter the new name o                                                                                                                                                          | f the limited liabi                    | lity company here:                                                                        |                                                                    |
| N/A                                                                                                                                                                                                |                                        |                                                                                           |                                                                    |
| The new name must be distinguishable and end with the                                                                                                                                              | words "Limited Liabi                   | ility Company," the designation "LLC" or the a                                            | abbreviation "L.L.C."                                              |
| Enter new principal offices address, if applic                                                                                                                                                     | able:                                  | 21301 Powerline Rd Suit                                                                   | e 207                                                              |
| (Principal office address MUST BE A STREE                                                                                                                                                          |                                        | Boca Raton, FL 33433                                                                      |                                                                    |
|                                                                                                                                                                                                    |                                        |                                                                                           |                                                                    |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE                                                                                                                   | <u>BOX)</u>                            | 21301 Powerline Rd Suit<br>Boca Raton, FL 33433                                           | e 207                                                              |
| B. If amending the registered agent and/<br>registered agent and/or the new registered of                                                                                                          |                                        |                                                                                           | the name of the new                                                |
| Name of New Registered Agent:                                                                                                                                                                      | Notlya Ho                              | Idings Corporation                                                                        | TACE TA                                                            |
| New Registered Office Address:                                                                                                                                                                     | 21301 Pov                              | werline Rd Suite 207                                                                      | AH B TH                                                            |
| THE TOBUSE STILL THAT ESS.                                                                                                                                                                         |                                        | Enter Florida street address                                                              | CO COURT                                                           |
|                                                                                                                                                                                                    | Boca Rate                              | on , Florida 3                                                                            | 3433                                                               |
|                                                                                                                                                                                                    |                                        | City                                                                                      | Zip Code                                                           |
| New Registered Agent's Signature, if changing I                                                                                                                                                    | Registered Agent:                      |                                                                                           | 75 P                                                               |
| I hereby accept the appointment as registere<br>provisions of all statutes relative to the prop<br>accept the obligations of my position as regi-<br>being filed to merely reflect a change in the | er and complete j<br>stered agent as p | performance of my duties, and I am j<br>rovided for in Cha <del>pter 608</del> , F.S. Or, | ree to comply with the<br>familiar with and<br>if this document is |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>                       | Address Type of Action         |
|--------------|-----------------------------------|--------------------------------|
| MGR          | SWB Assets Corp                   | 1100 S Federal Hwy             |
|              |                                   | Ste A-103                      |
|              |                                   | Deerfield Beach, FL 33441      |
| MGR          | UNINVEST FINANCIAL SERVICES, CORP | 1100 S Federal Hwy             |
|              |                                   | Ste A-103                      |
|              |                                   | Deerfield Beach, FL 33441      |
| AMBR         | Ghalib Investments Ltd.           | Castle Court, Coastal Building |
|              |                                   | PO Box 3200, Road Town         |
|              |                                   | Tortola, BVI                   |
|              |                                   | Add  Remove  Remove            |
|              |                                   | U Add                          |
|              |                                   | Remove                         |
|              |                                   |                                |

|                                                                                                                                                                                              | -                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
|                                                                                                                                                                                              |                                                         |
| ective date, if other than the date of filing:  effective date must be specific, cannot be prior to date of receipt or filed date this document is filed by the Florida Department of State) | (optional) i date and cannot be more than 90 days after |
| 13rd of May 2014                                                                                                                                                                             |                                                         |
|                                                                                                                                                                                              |                                                         |
| Signature of a member or authoriz                                                                                                                                                            |                                                         |
|                                                                                                                                                                                              | Cardoso                                                 |

Page 3 of 3

Filing Fee: \$25.00

