Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000077730 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

Account Name

: AKERMAN LLP - MIAMI

Account Number : 075471001363 Phone

: (305)374-5600

Fax Number

: (305)374-5095

EFFECTIVE DATE

nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **B4 AMERICAS LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$60.00
THE RESERVE AND PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON	

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

4/1/2014



April 2, 2014

- 5

FLORIDA DEPARTMENT OF STATE Division of Corporations

B4 AMERICAS LLC PEDRO A. FREYRE ONE SE THIRD AVENUE, 3RD PLOOR MIAMI, PL 33131

SUBJECT: B4 AMERICAS LLC

REF: L14000036618

214 APR 32 44 15:36

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date must be specific and cannot be prior to the date of filing.

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.

Teresa Brown Regulatory Specialist II FAX Aud. #: E14000077730 Letter Number: 214A00006970

APR-2

P.O BOX 6327 - Tallahassee, Florula 32314

APR-02-2014 11:36AM

FROM-AKERMAN LLP

(H14000077730 3)

+3053745095

ADTIČI ES OF AMENDMENT

ARIX	1	PIATE I ATMINISTE I A T	1 30 m
ARTIC	LES OF O	RGANIZATION	ARR 2 MID: 06
84 AMERICAS LLC			Et. 7.5
(Name of the Limited) (A	Liability Compan Florida Limited Li	y as it now appear, on our recor- ability Company)	95 8
The Articles of Organization for this Limited Liab Florida document number L14000036618			and assigned
This amendment is submitted to amend the follow	ine:		FEECOT
	_		LIFECTIVE DATE
A. If amending name, enter the new name of the	<u>ie limited liabil</u>	lity company here:	1-3-14
N/A		· · · · · · · · · · · · · · · · · · ·	<u></u>
The new name must be distinguishable and and with the wo	rds "Limited Liabil	lity Company," the designation "LI	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	175 SW 7TH STREET	<u> </u>
(Principal office address MUST BE A STREET		SUITE 1618	
		MIAMI, FL 33130	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	175 SW 7TH STREET SUITE 1618	
		MIAMI, FL 33130	
B. If amending the registered agent and/or registered agent and/or the new registered office	rogistered off e address here	ñce address on our record;	s, enter the name of the new
Name of New Registered Agent:	N/A	<u> </u>	
New Registered Office Address:		Enier Flurida sirses addre	ss
			orida
		City	Zip Code

New Registered Ayent'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

Page 1 of 3

(H14000077730 3)

APR-02-2014	11:36AM	FROM-AKERMAN	LLP
-------------	---------	--------------	-----

+3053745095

T-347 P.003/004 F-221

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 = Ma AMBR = Au	nager thorized Member			}	
<u>Title</u>	<u>Name</u>		Address		Type of Action
MGRD	MARCO BIANCH		175 SW 7TH STR	EET	_ = Add
			SUITE 1618		🗆 Remove
			MIAMI, FL 33130		
MGRD	BRUNO DE DENARC		175 SW 7TH STR	EET	■ Add
			SUITE 1618		🗆 Remove
			MIAMI, FL 33130		
MGRD	RINALDO POLESE		175 SW 7TH STR	EET	Add
			SUITE 1618		🗆 Remove
			MIAMI, FL 33130		
MGRVPCEO TSD	LUIZ EDUARDO BORGES	}	175 SW 7TH STR	EET	≅ Add
			SUITE 1618		□ Remove
			MIAMI, FL 33130		_
					 A dd
_					_ 🛘 Remove
				•	
		- 			_ 🗆 Remove
		Page 2 o	r3		
(H140000777	730 3)	1 486 4 U	• 0		

APR-02-2014 11:37AM FROM-AKERMAN LLP	+3053745095	7-347	P.004/004	F-221
D. If amending any other information, enter cl N/A	ange(s) here: (Attach additional sheets, if ne	cessary.)		
				
				
				
	Ulabota.			
E. Effective date, if other than the date of filing (The effective date must be specific, cannot be prior to da the date this document is filed by the Florida Department	to of receipt or filed date and cannot be riore than 90 day	tional) s after		
Dated April 1	2014	}		
Lilla				
Authorized Represen	number or authorized representative of a member			
	Typed or printed dame of signee			
	Page 3 of 3			
•	Filing Fee: \$25.00			
·				