L14000049746

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:	Registrat Division				
ernir		ıpar Hold	ings LTD LLC		
SUBJECT: Name of Limited Liabi				ited Liability Company	
				1	
The encl	losed Artic	cles of Ai	mendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all co	orrespond	lence concerning this matter	to the following:	
			Guilherme Martini Kuchka	ırian	
				Name of Person	
			Rempar Holdings LTD LL	С	
				Firm/Company	
			800 Claughton Island Driv	e Suite 1303	
				Address	
			Miami Florida 33131		
				City/State and Zip Code	
			kuchkarian@hotmail.com		
For furth	ner inform	iation cou	H-mail address; () Icerning this matter, please or	to be used for future annual report	notification)
	me Martir			786 474-2976	6
- Guiller			<u></u>	at (ytime Telephone Number
	!	Name of I	'erson	Area Code Day	time releptione Number
Enclosed	d is a chec	ek 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 A	Address: ation Se	ection	Street Address Registration	
	Divisio	n of Co	rporations	Division of C	Corporations
	P.O. Bo Taliaha	ox 6327 .ssee, Fl	32314		of Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REMPAR HOLDINGS LTD LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L000049746</u>	were filed on 03/26/2014	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:	800 Claughton Island Drive Suite 1303		
(Principal office address MUST BE A STREET ADDRESS)	Miami FL 33131	78	
		2020 HAY	
Enter new mailing address, if applicable:	800 Claughton Island Drive 1303	18	
(Mailing address MAY BE A POST OFFICE BOX)	Miami FL 33131	<u> </u>	
B. If amending the registered agent and/or registered office a	address on our records enter the nom	ပါ ယ of the new registered	
agent and/or the new registered office address here:	address on our records, enter the nam	e of the new registered	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		

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.

City

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>	Type of Action
MGR	Guilherme Martini Kuchkarian	800 Claughton Island Drive Suite 1303	
			□Remove
			□Change
AMBR	Roberto Kuchkarian	800 Claughton Island Drive Suite 1303	🗆 Add
			□Remove
			■ Change
			□Add
			□Remove
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-			□Add
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	05/13/2020		
ective date, if other than the directive date is listed, the date must be	ate of filing:	te of filing or more than 90 days at	tional) ier filing) Pursuant to 605 0207
ite: If the date inserted in this bloc	k does not meet the applicable s	statutory filing requirements, t	his date will not be listed as
	artment of State's records.		
rument's effective date on the 17ep			
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Filing Fee: \$25.00