

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : EPGD ATTORNEYS AT LAW, P.A.
Account Number : I20140000049
Phone : (786)837-6787
Fax Number : (786)837-6787

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

Email Address: ERIC@EPGDLAW.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THINKING HEADS AMERICAS, LLC**

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 DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THINKING HEADS AMERICAS, 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:

ERIC P. GROS-DUBOIS, ESQ.

Name of Person

EPGD ATTORNEYS AT LAW, P.A.

Firm/Company

2701 PONCE DE LEON BLVD STE 202

Address

CORAL GABLES, FL 33134

City/State and Zip Code

ERIC@EPGDLAW.COM

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

For further information concerning this matter, please call:

ERIC P. GROS-DUBOIS, ESQ.

786

837-6787

at ()

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

THINKING HEADS AMERICAS, 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 Liability Company were filed on 03/25/2014 and assigned
Florida document number L14000050073.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	CASTELLANO, JOSE	33156 TANYA STREET	<input type="checkbox"/> Add
		CORAL GABLES, FL 33156	<input checked="" type="checkbox"/> Remove
MGR	CASTELLANO, JOSE	1674 MERIDIAN AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	
MGR	RABASSA, EDUARDO	426 HAMPTON LANE	<input checked="" type="checkbox"/> Add
		KEY BISCAVNE, FL 33149	<input checked="" type="checkbox"/> Remove
MGR	RABASSA, EDUARDO	1674 MERIDIAN AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	
MGR	ROMERO-ABREU, DANIE	1674 MERIDIAN AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	
MGR	ABANADES, IVAN	1674 MERIDIAN AVENUE	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JULY 1, 2014



Signature of a member or authorized representative of a member

CASTELLANO, JOSE

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA