Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : AMBAR DIAZ, P.A.

Account Number : I20110000016

Phone

: (305)476-8100

Fax Number

: (305)476-8788

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CUBAN AND CARIBBEAN EXPORT LLC

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MAY 2 1 2014

5/19/2014

TO: 8506176383

_ P.2___

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COVER LETTER

TO:

Registration Section Division of Corporations

CUBAN AND CARIBBEAN EXPORT 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:

Ambar Diaz, Esq.

AMBAR DIAZ, P.A.

782 NW 42 AVE SUITE 434

MIAMI FL 33126

City/State and Zip Code

redlandpete@yahoo.com

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

For further information concerning this matter, please call:

Ambar Diaz

at (305) 476-8100

Area Code Daytime Telephone Number

Name of Person

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

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TO: 8506176383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CUBAN AND CARIBBEAN EXPORT LLC

Name of the Limited Liability Company as it now appears on our records.)

(Name of the 12th		Liability Company)	on our records.)	THO TO
The Articles of Organization for this Limited I	Liability Company	v were filed on 05	06/2014	and assigned
Florida document number L14000073716				
	 ,			P
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited lial	bility company her	<u>'e</u> :	
AMERICAS & CARIBBEAN EXPOR	T, LLC			
The new name must be distinguishable and end with the	words "Limited Lia	bility Company," the d	esignation "LLC" or the s	bbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE				
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
				<u></u>
registered agent and/or the new registered of New Registered Agent:	M/A	<u>re</u> :		
New Registered Office Address:	_			
		Enter Florid	la street address	
			, Florida	
		City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent	1		
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as reg being flied to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as registered office	e performance of n provided for in Cl	ny duties, and I am f hapter 605, F.S. Or,	familiar with and if this document is
	1f Cha	inging Registered Age	nt, Signature of New Re	gistered Agent
	Page	1 of 3		
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MGR = Manager AMBR = Authorized Member Fitle Name Address : of Ac N/A Address : of Ac Remove	Authorized	Member being added or removed fr	com our records: (((H140	name, and address of each Manager 100118289 3)))		
N/A Add Remove Add Add Remove Add Add Remove Add Ad	MGR = Manager AMBR = Authorized Member					
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(((H140001182893)))

If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
i -	
(The effective	date, if other than the date of filing:
Dated	May 14TH , 2019.
	Palifin
	Signature of a member or awthorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00