# L140000083673

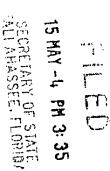
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то:	Reg Div	istration Se ision of Cor	ction porations		er su	
CUID	IECT.	Perfect Trai	nslations LLC			
SUB	JECT:		Name of Lim	nme of Limited Liability Company  s) are submitted for filing.  us matter to the following:  Name of Person  ons LLC  Firm/Company  te Drive, Apt 2704  Address  City/State and Zip Code  m  address: (to be used for future annual report notification)		
The o	enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Pleas	se return	all correspo	ndence concerning this matter	to the following:		
			Lorena Di Nola			
			· · · · · · · · · · · · · · · · · · ·	Name of Person		
			Perfect Translations LLC			
				Firm/Company		
			1000 South Pointe Drive, A	Apt 2704		
Address						
			Miami Beach, FL 33139			
				City/State and Zip Code		
			alsazia@gmail.com	to be used for future annual report notifi	ication)	
For f	urther ir	nformation co	oncerning this matter, please co	•	outon)	
Lore	na Di N			786 606-4268 at ()		
		Name o	f Person	Area Code Daytime	Telephone Number	
Encl	osed is a	check for th	ne following amount:			
<b>=</b> \$	625.00 F	iling 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

Perfect Translations 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 05/22/2014 and assigned Florida document number L14000083673 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1000 South Pointe Drive, Apt 2704 Enter new principal offices address, if applicable: Miami Beach, FL 33139 (Principal office address MUST BE A STREET ADDRESS) P.O. Box 191865 Enter new mailing address, if applicable: Miami Beach, FL 33119 (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 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 you 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

If Changing Registered Agent, Signature of New Registered Agent

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 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
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Filing Fee: \$25.00