14066 146462

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	 WA⊓	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		:

Office Use Only



000276885630

09/23/15--01019--018 **25.00



COVER LETTER

Division of Corp			
SUBJECT:	Chem	YSA LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspon	ndence concerning this matter	to the following:	
	Nata	lie Chasow Name of Person	
	Chem	USA LLC	
		rini/Company	Road, Suite DII2
	Fort Lau	derdale FL 3 City/State and Zith Code	33 <i>09</i>
	natalie.cha	row 1 Chem - use to be used for future annual report notifi	ication)
For further information ed	oncerning this matter, please c	all:	
Natalie a	Charow	at (<u>954</u>) <u>556</u> Area Code Daytime	-1700
Name of	î Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 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

Chem U	SA LLC			
(Name of the Limited Liabil (A Florid	ity Company as it now appears of a Limited Liability Company)	n our records.)	_	
The Articles of Organization for this Limited Liability (Florida document numberL140001464		9/18/2019	and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company here	:		
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the desig	gnation "LLC" or the at	breviation "1.1	C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)		• • • • • • • • • • • • • • • • • • • •	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regi registered agent and/or the new registered office ado		ur records, <u>enter</u>	the name o	of the new
Name of New Registered Agent:				
New Registered Office Address:			:	जे ज
New Registered Office Address.	Enter Florida	street address		OF S
	_	, Florida		<u>s</u>
	City		Zip Code	ט ט
New Registered Agent's Signature, if changing Registere	ed Agent:			*
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my agent as provided for in Cha red office address, I hereby o	aduties, and Lam , apter 605, F.S. Or,	lanuliar will if this docu	h and ment is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address 11 + C . A	Type of Action
MGR	Daniel Gold	2700 West Cypress Road Building D, Suites 112 + 11 Fort Lauderdale, FL 3336	3 M Add
			🗆 Remove
			Change
<u>M6R</u>	Nicholas Gold	2700 West Cypress Creek Building D. Buites 112 + 11 Fort Lauderdale, FL 333	Roed
	,	Fort Laudesdale, FL 333	Remove
			Change
			
			□ Remove
			Change
			
			□ Remove
			Change
			Remove
			Change
			🗆 Add
			☐ Remove
			LI REMOVE
			Change

								
·								_
			·					
-								
								
						<u> </u>		
				· · · · · · · · · · · · · · · · · · ·				
					· · · · · · · · · · · · · · · · · · ·			
_								
				 				
							****	<u> </u>
ffective an effect	edate, if other than tive date is listed, the date is	the date of fili must be specific a	ing: and cannot be r	orsor to date of 1	iling or more than	optiona n 90 days after tilir		6.5
lote: If	the date inserted in this t's effective date on the	s block does no	t meet the ap	plicable statu	ory filing requi	irements, this day	te will not be	līšied as
ocumen	t selfective time on me	; Department o.	i State Sirce	nus.			7.5	ట
e reco	rd specifies a delay	yed effective	adate but	not an eff	activa tima	at 12:01 a m	on the e	රු after o
	Oth day after the r			not an ene	ective time,	at 12.01 a.iii	i. Old true er	111E1 O
Dated	September	21 22	20	15				
	Septembe		J ,					
			Yaran and an	and bandenad mann	esentative of a m	and are		_

Page 3 of 3

Filing Fee: \$25.00