

L14000164309

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MINO & MINA LLC**

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$30.00

RECEIVED

14 OCT 28 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICESSECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 28 PM 2:25

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MINO & MINA 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:

Gina Mulligan

Name of Person

Corporate Creations

Firm/Company

11380 Prosperity Farms Rd. #221E

Address

Palm Beach Gardens, FL 33410

Gina@corpcreations.com City/State and Zip Code

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

For further information concerning this matter, please call:

Gina Mulligan

Name of Person

at (561)

Area Code

694-8107

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**

MINO & MINA LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

FILED
14 OCT 28 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/21/2014 and assigned Florida document number L14000164309.

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:

801 Brickell Avenue, Suite 1610

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33131

Enter new mailing address, if applicable:

c/o Alexandre Piquet, Esq. - Piquet Law Firm, P.A.

(Mailing address MAY BE A POST OFFICE BOX)

801 Brickell Avenue, Suite 1610

Miami, FL 33131

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:

Corporate Creations Network Inc.

New Registered Office Address:

11380 Prosperity Farms Road #221E

Enter Florida street address

Palm Beach Gardens

Florida

33410

City

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.

Gina Mulligan
If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

Gina Mulligan, Special Secretary

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

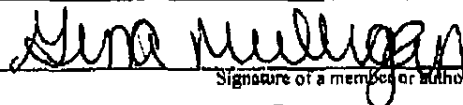
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Romulo Miranda Bittencourt	801 Brickell Avenue, Suite 1610	<input type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
MGR	Christiane Furtado Venancio Bittencourt	801 Brickell Avenue, Suite 1610	<input type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 in date of receipt or filing date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 28

2014



Signature of a member or authorized representative of a member

Gina Mulligan, Attorney-in-Fact

Typed or printed name of signee