Division of Corporations

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Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)694-1639

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OKINAWA SISTEMAS CORPORATIVOS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OKINAWA SISTEMAS CORPORATIVOS LL	<b>L</b>		
(Name of the Limited Liability C (A Plorida Li	Company as It now appears mited Liability Company)	on our records,)	
The Articles of Organization for this Limited Liability Com-	npany were filed on 12/0	01/2014	and assigned
Florida document number L14000184715			name of the nex
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company her	<u>,6</u> ;	
The new name must be distinguishable and contain the words "Limited	I Liability Company," the de-	signation "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>	Phon	
		Francis (St.)	
		The state of the s	CO serve
Enter new mulling address, if applicable:	······································	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	مسرر (آلام) داده : داده :	
		13 7 mm 10	
		1	
B. If amending the registered agent and/or register		our records, enter the	name of the ne
registered agent and/or the new registered office addres	s nere:		
Name of New Registered Agent:			
Name of the Wide State of Alberta			
New Registered Office Address:	Frier Flori	do street address	
		AO SEPER LILLANDING	
<del></del>	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered A	•		Up Com
			4
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and com			

If Changing Registered Agent, Signature of New Registered Agent

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.

\_[ 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 Type of Action <u>Title</u> Name Address CAMILO E MARTIN 460 NE 28St suite # 406 MGR \_D Add Miami, FL 33137 ■ Remove ☐ Change MGR 4937 SW 74th Court, Suite 3 OKINAWA SISTEMAS CORPORATIVOS LLC Bb∧ 📾 Miami, FL 33155 ☐ Remove ☐ Change □ ∧dd \_□ Remove ☐ Change □ ∧dd □ Remove Change Change  $\triangleright$ \_□ Remove जिल्हें इन्हें \_ Change □ Remove

	D. If amending any other information, outer change(s) here: (Auach additional sheets, if necessary.)	
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	The Desire of the Company of the Co	U
Effe	ective date, if other than the date of filing:  (optional)  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Fursure	400 W
Non	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.	ot be listed
e re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	ne earlie
The	e 90th day after the record is filed.	
ited .	February 24. 2016	
	Egnel Hate	
	Signature of a member or authorized representative of a member	

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