LISULOSAUAZ

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COVER LETTER

TO:	Registration Se Division of Cor					
CUDIE		O USA, LLC				
SUBJE	C1:	Name of Lim	ited Liability Company			
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please 1	eturn all correspo	ndence concerning this matter	to the following:			
		JOHN KOCHKERIAN, E	SQ.			
			Name of Person			
		JOHN KOCHKERIAN, E	SQ.			
			Firm/Company			
10231 LAKE VISTA COURT						
			Address			
		PARKLAND, FL 33076		SECI FALL/	2015	
		KOCHKERIAN@GMAIL.	City/State and Zip Code	HASS	OCT -	
For furt	her information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notificatio		σ U	
		, , , , , , , , , , , , , , , , , , ,		. ORI		
JOHN	KOCHKERIAN		954 818-9795 at ()	2m	0_	
	Name o	f Person	Area Code Daytime Tele	phone Number		
Enclose	ed is a check for th	ne following amount:				
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificat Certificat Certified (additional	e of Sta Copy	atus &
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	s		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTERGIRO USA, LLC		
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited I	iability Company were filed on MA	Y 15, 2012 and assigned
Florida document number L15000082622	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>e</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		77 S 21
Enter new mailing address, if applicable:		ARE DOCT
		SSE CO
(Mailing address MAY BE A POST OFFICE	<u></u>	
D. If amonding the registered egent and	Non registered office address on	
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the fame of the ne
	,	
Name of New Registered Agent:	JOHN KOCHKERIAN	
New Registered Office Address:	10231 LAKE VISTA COURT	
	Enter Florid	la street address
	PARKLAND	, Florida
	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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
MGR	PAR WANNMAN	1311 BAY TERR., NORTH BAY VILLAGE, FI	L 33141 ■ Add
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iffective :	date, if other than t	he date of filing) :		(optional) 		
fan effectiv Note: If th	ve date is listed, the date n the date inserted in this 's effective date on the	nust be specific and block does not n	cannot be prior to neet the applica		more than 90 days	after filin	g.) Pursu		
	d specifies a delay Oth day after the re		late, but not	an effective	time, at 12:	01 a.m.	on th	e earliei	of:
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Filing Fee: \$25.00