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# **COVER LETTER**

Division	ation Sectio 1 of Corpor	ations			/	1	
SUBJECT:	arible	bean 1	Worke Name of Limit	d Imported Liability Company	25 5	Exposet L	ZC
The enclosed Art	icles of Am	endment and	fee(s) are subn	nitted for filing.			
Please return all o	corresponde	nce concernin	ng this matter to	o the following:			
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Enclosed is a che	eck for the fo	ollowing amo	unt:				
\$25.00 Filing	g Fee	□ \$30.00 Filii Certificate	ng Fee & e of Status	□ \$55.00 Filing F Certified Copy (additional copy is	,	□ \$60.00 Filing In Certificate of Securified Copy (additional copy in Securified Copy in	Status &

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



Caribbean World Import & Export Ald Cors (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 Florida document number	were filed on May	1 22, 2015 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	pility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		; <u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		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 Rafael G. Rodriguez □ Add 2850 Forest Hills Blud #303 Cora/Springs, Fl 33065 ☐ Change □ Add □ Remove □ Add · □ Remove ☐ Change □ Add ☐ Remove □ Change □ Add \_□ Remove \_□ Change

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