

L150000 97241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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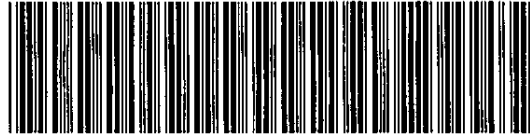
(Business Entity Name)

(Document Number)

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15 JUN 29 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 30 2015
J SHIVERS



CALDERARO
TYRRELL
LAW GROUP
immigration attorneys

June 22, 2015

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

RE.: LE MAITRE, LLC
DOCUMENT NO. L15000097241

We respectfully submit to you the enclosed Articles of Amendment along with a check in the amount of \$25.00 for filing.

If you have any further questions, please do not hesitate to contact us.

Respectfully

Christopher Tyrrell, Esq.
Partner
The Calderaro Tyrrell Law Group

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LE MAITRE, 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:

SANDRA R. CALDERARO

Name of Person

CALDERARO TYRELL LAW GROUP

Firm/Company

6301 NW 5TH WAY, SUITE 2000

Address

FORT LAUDERDALE, FL 33309

City/State and Zip Code

rcalderaro@visamiami.com

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

For further information concerning this matter, please call:

Sandra R. Calderaro

954 376-6161
at ()

Name of Person

Area Code

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**

LE MAITRE, LLC

(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 were filed on June 03, 2015 and assigned
Florida document number L15000097241

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 contain the words "Limited Liability 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)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUN 29 AM 11:08
FILED

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARIANA A. SCHROH	CALLE CUYO 2260 MARTINEZ	<input type="checkbox"/> Add
		BUENOS AIRES 1640 ARGENTINA	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

19 JUN 1964
SECRET
ALI AHMAD

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 005.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____, 20____

SANTIAGO PINERA

Typed or printed name of signee

Filing Fee: \$25.00