15000127671

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

	of Corporations
# MEG SUBJECT:	SABROKERS ADVISORS BOLIVIA LLC
Sobolic (Name of Limited Liability Company
The enclosed Artic	eles of Amendment and fee(s) are submitted for filing.
Please return all co	orrespondence concerning this matter to the following:
	JAMES GONZALEZ
	Name of Person
	AT PLUS CORP
	Firm/Company
	3650 NW 82ND AVE SUITE 404
	Address
	DORAL, FL 33166
	City/State and Zip Code
	VELFIN@GMAIL.COM E-mail address: (to be used for future annual report notification)
For further informa	ation concerning this matter, please call:
JAMES GONZAL	
h	Name of Person Area Code Daytime Telephone Number
Enclosed is a check	k for the following amount:
■ \$25.00 Filing H	Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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

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y Company as it now appears on our records Limited Liability Company)	<u>.</u>)
ompany were filed on 07/27/2015	and assigned
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ared office address on our records	
	, enter the name of the
<u> </u>	
Enter Florida street address	
	rida
City	Zip Code
	company as it now appears on our records Limited Liability Company) company were filed on 07/27/2015 ded liability company here: ted Liability Company," the designation "LLC" ESS) ered office address on our records. ess here: Enter Florida street address Flo

New Registered Agent's Signarure, 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>	Name	Address	Type of Action
AMBR	Yrela Del Carmen Carrillo Flores	3650 NW 82nd Ave	
		suite 404	Remove
		Doral, FL 33166	☐ Change
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	specifies a delayed of day after the recor		ate, but not	an effective	time, at 12:0)1 a.m. on th	ne earlier	ro
Dated MAR	CH 20	,	2017					
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Page 3 of 3

Filing Fee: \$25.00

March 20, 2017

RE: Doc#L15000127671

To whom it may concern,

Please be advised I am a member of Megabrokers Advisors Bolivia LLC and Fishcorp S.A LLC which I recently filed a dissolution for. I am currently filing an amendment to change the name of Megabrokers Advisors Bolivia LLC to Fishcorp S.A LLC. I called the Florida Dept. of State Division of Corporations and was told to write this letter in order for the amendment to be approved. Since I am using a name that I filed a dissolution for this letter is being included in order to file the amendment. Thanks for your help in this matter.

Sincerely,

Yrela Del Carmen Carrillo Flores

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