

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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TARY OF STATE
ASSEE, FLORIC

Division of Corporations

Fax Number : (850)617-6383

Resubmission, please honor original file date of

11/17/2016

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

Account Number : FCA0000000023 Phone : (614)280-3338

Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

Resubmission, please honor original file date of 11/17/2016

## CURVE HOLDINGS, LLC Certificate of Status 0 Certified Copy 0 Page Count 05 Estimated Charge \$25.00

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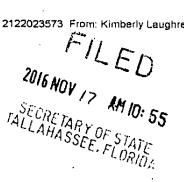
Help

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations			
CURV	e Holdings, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.		
Please return all corre	espandence concerning this matter	to the following:		
	Cris M Neely			
		Name of Person		<del></del>
	TFP International Inc.	·		
	**************************************	Firm/Company		•••
	20807 Biscayne Boulevard	d. Suite 203		
		Address		<b>~~</b>
	Aventura, FL 33180			
	<del></del>	City/State and Zip Code		-
	enecly@tradefinancesolution			
	E-mail address: (	to be used for future annual r	epart notification)	
For further information	on concerning this matter, please co	ult: .		
Lorena Pardo		786 288	0763	
Nan	ne of Person	nt () Area Code	Daytime Telephone Numbe	r
Enclosed is a check fo	or the following amount:			
□ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	🗖 \$55.00 Filing Fee & Certified Copy (additional copy is uncle	Certifica Decd) Certifica	ite of Status &
Reg Div P.O	ALING ADDRESS: distration Section distant of Corporations Box 6327 dahassee, FL 32314	Registratio Division o Clifton Bu	Corporations	

2661 Executive Center Circle Tallahessee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CURVE HOLDINGS, LLC				
(Name of the Limi	ted Linbility Compa (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L	iability Company	were filed on 09/04/2015	and assigned	
Florida document number L15000149282				
his amendment is submitted to amend the following	owing:			
. If amending name, enter the new name o	f the limited liab	dlity company here:		
he new name must be distinguishable and contain the w	vords "Limited Liabil	lity Company," the designation "LLC" or o	he abbreviation "L.L.C."	
nter new principal offices address, if applie	able:	20807 Biscayne Boulevard, Suite 203		
Principal office address MUST BE A STREE	TADDRESS)	Aventura Fl 33180		
	•			
inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u>BOX</u> )			
Adding address MAY BE A POST OFFICE  . If amending the registered agent and	or registered of		iter the name of the nev	
Aniline address MAY BE A POST OFFICE  If amending the registered agent and	or registered of	2:	iter the name of the nev	
Agiling address MAY BE A POST OFFICE  If amending the registered agent and/egistered agent and/or the new registered of	or registered of Tice address here C 7 Corporation	e: n System ation System, 1200 South Pine Island		
Mailing address MAY BE A POST OFFICE.  If amending the registered agent and/egistered agent and/or the new registered of Name of New Registered Agent:	or registered of Tice address here C 7 Corporation	n System	Road	

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

Peter Trawinski **Assistant Secretary** 

Page 1 of 3

To: Page 6 of 7

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
MGR	TFP International Inc	20807 Biscayne Boulevard, Suile 2	
	·	Aventura Fl 33180	Remove
			Change
	SILVASAN GLOBAL FUND, LLC	490 HOLIDAY DRIVE	Add
		HALLANDALE BEACH, FL 330(	II Remove
		MATERIAL SECTION SECTI	□ Change
	·		TALCARE HOVE TIL
			SEE B Add Co. Change
			□ Add
			□ Remove
			Change
<del></del>			□ Add
			☐ Remove
			☐ Change

. If amending any other in	ormation, enter c	:hange(s) here:	(Attach addition	al sheets, if neces	saıyı.)	
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Effective date, if other that (If an effective date is listed, the de Note: If the date inserted in t document's effective date on	his block does not n	neet the applicab	dae of filing or nord le statutory filing r	(option than 90 days after it) equirements, this d	al) ing.) Pursuant to 605.020 ale will not be listed a	07 (3)(b) is the
he record specifies a de The 90th day after the	ayed effective de record is filed.	late, but not a	an effective tim	ne, at 12:01 a.n	n. on the earlier (	of:
Dated November 16	1	2016	7			
	Signature of a	member or authori	red representative of	a member		
	•					
	····	Typed or printed	SILVASOV name of signee	Manager		

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Filing Fee: \$25.00