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COVER LETTER

SUBJECT:	i.B.	S USA LLC	
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Ortiz, Blanca Yaimi Y	
	Name of Limited Liability Company assed Articles of Amendment and fee(s) are submitted for filing. arm all correspondence concerning this matter to the following: Ortiz, Blanca Yaimi Y Name of Person Firm/Company 3311 El Jardin Dr Apt 4 Address Hollywood, FL 33024 City/State and Zip Code yaimi74@yahoo.it E-mail address: (to be used for future annual report notification) er information concerning this matter, please call: Ortiz, Blanca Yaimi Y Sol 543-1329 Name of Person Area Code Daytime Telephone Number		
		Firm/Company	
		3311 El Jardin Dr Apt 4	
		Address	
		Hollywood, FL 33024	
		·	
	E-mail address: (t		cation)
For further information	concerning this matter, please ca	ill:	
Ortiz, Bla	nca Yaimi Y	_ at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he tollowing amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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

	S USA LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lin	ompany as it now appears nited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Comp. Florida document number L15000171541	pany were filed on	10/08/2015	and assigned
ionda document number			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company her	<u>e</u> :	
he new name must be distinguishable and contain the words "Limited	Liability Company," the des	ignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	
Principal office address MUST BE A STREET ADDRESS	<u></u>		. 9
			œ . Vise
		 :	S SE
inter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE BOX)			3 300
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			34
3. If amending the registered agent and/or registere egistered agent and/or the new registered office address		our records, <u>enter</u>	the name of the
	nere .		
Name of New Registered Agent:	N/A	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	N/A		
	Enter Florid	a 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	Valentino Burei	Via Massimo D'Antona 6	Add
		Pianezza, Torino, Italia	□ Remove
			Change
MGR	Salvatore Girioli	Corso Susa 175	■ Add
		Rivoli, l'orino. Italia	Remove
			□ Change
			Add
			Remove
			☐ Change
		.	Add
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			Remove
			Change

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		_ - F;
	06/07/2018	
(If an et	ve date, if other than the date of filing:	to 605.020
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not bent's effective date on the Department of State's records.	e listed a
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier (
D	06/07/18	
Dated	Muar	
	FI MW	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00