## L15000187654

(Req	uestor's Name	)
(Add	ress)	
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(City	/State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
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SECNE LARY OF STATE

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## **COVER LETTER**

TO	D: Registration Sec Division of Corp			
QT.	Links World			
3L	<u></u>		ited Liability Company	<del></del>
		Amendment and fee(s) are sub-	•	
		Laura B. Muniz		
			Name of Person	
		3A Worldwide		
			Firm/Company	<del></del>
		900 SW 8th Street, Suite C	-2	
		<del></del>	Address	
		Miami, FL, 33130		
			City/State and Zip Code	
		lmuniz@3aworldwide.com  E-mail address: (1)	to be used for future annual report notifi	cation)
Fo	r further information co	oncerning this matter, please ca	-	······
La	ura B. Muniz		786 362-6500 Ext Area Code Daytime	308
	Name of	Person	Area Code Daytime	Telephone Number
En	closed is a check for th	e 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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 30, 2015

LAURA B. MUNIZ 3A WORLDWIDE 900 SW 8TH STREET, STE C-2 MIAMI, FL 33130

SUBJECT: LINKS WORLDWIDE, LLC

Ref. Number: L15000187654

We have received your document for LINKS WORLDWIDE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only received the cover letter. I am enclosing an Amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 215A00024988

FILED

2015 DEC -7 PM 3: 50

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Links Worldwide, LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited)	iny as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited I Florida document number L15000187654	Liability Company	were filed on November	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and registered agent and/or the new registered of			records, enter the name of the no
Name of New Registered Agent:	Laura B. Muniz	<u> </u>	
New Registered Office Address:	900 SW 8th Str		
		Enter Florida stre	
	<u>Miami</u>	City	, Florida 33130 Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	•	Σφ cone
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as region being filed to merely reflect a change in the company has been notified in writing of this	per and complete sistered agent as per registered office	performance of my du provided for in Chapte	ities, and I am familiar with and er 605, F.S. Or, if this document is

Page 1 of 3

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>	Type of Action
MGR	Edward De Valle	900 SW 8th Street, Suite C-2	
		Miami, FL 33130	■ Remove
			☐ Change
<del></del>			Add
			Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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E. Effective date, if other than the date of filing:  (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 605  Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	5.0207 (3)(b) ed as the	
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie (b) The 90th day after the record is filed.	er of:	
Dated December 2 , 2015  Signature of a member or authorized representative of a member		
GUA B. MUTIZ FSA.		

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Filing Fee: \$25.00