LIOCOCO 9222

| (1 | Requestor's Name) |
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| (, | Address) |
| (. | Address) |
| (4 | City/State/Zip/Phone #) |
| PICK-UP | ☐ WAIT ☐ MAIL |
| (1 | Business Entity Name) |
| (1 | Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
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Office Use Only



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| TO: Registration S Division of Co | | | Sept Sept Sept Sept Sept Sept Sept Sept |
|-----------------------------------|--|---|---|
| CORPOR | RACION PESQUERA ESME | RALDA CA LLC | , . |
| SUBJECT. | Name of Lin | ited Liability Company | |
| The enclosed Articles of | f Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corresp | condence concerning this matter | to the following: | |
| | NATALIA A HERNANDEZ | | |
| | CMP INTERNATIONAL CO | Name of Person DNSULTANTS INC | _ |
| | 10570 NW 27TH ST SUITE | Firm/Company E 101 | |
| | DORAL, FL 33172 | Address | |
| | | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report notil | fication) |
| For further information | concerning this matter, please c | all: | |
| NATALIA A HERNAN | IDEZ | 786 619-3801 | |
| Name | of Person | | 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

CORPORACION PESQUERA ESMERALDA CA 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 11/26/2018 and assigned Florida document number L16000009222 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 10570 NW 27TH ST Enter new principal offices address, if applicable: SUITE 101 (Principal office address MUST BE A STREET ADDRESS) **DORAL, FL 33172** SAME 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: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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.

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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 | GUSTAVO EFRAIN MORENO | 2541 NW 72 AVE MIAMI, FL 33122 | |
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| ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date to 15 the date inspected in this black. | (optional) |
| te: If the date inserted in this block does not meet the applicable sument's effective date on the Department of State's records. | tatutory filing requirements, this date will not be listed |
| services of the Separation of State 3 records. | |
| record specifies a delayed effective date, but not an | effective time, at 12:01 a.m. on the earlier |
| he 90th day after the record is filed. | enecuve time, at 12.01 a.m. on the earner |
| NOVEMBER 26 | |
| ed NOVEMBER 26 2018 | 1 |
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| MEMON L | representative of a member |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00