

L16 0000 16369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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2016 AUG -5 A 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AUG 08 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2016

MARTA FUERTES
12186 SW 131 AVE
MIAMI, FL 33186

SUBJECT: ARWAY TRADING LLC
Ref. Number: L16000016369

TALLAHASSEE, FLORIDA

2016 AUG -5 PM 3:49

We have received your document for ARWAY TRADING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

Letter Number: 316A00014088

8/2/16

NOTE:

See attached
executed document

Justin M Shivers
786-344-6164

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ARWAY TRADING LLC

DOCUMENT NUMBER: L16000016369

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARTA M. FUERTES, CPA

(Name of Contact Person)

MARTA M. FUERTES, CPA

(Firm/ Company)

12186 SW 131 AVENUE

(Address)

MIAMI, FL 33186

(City/ State and Zip Code)

mmfuentes@mfuentescpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARTA M. FUERTES, CPA

(Name of Contact Person)

at 305-234-9860

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|---|--|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ARWAY TRADING 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 January 25, 2016 and assigned
Florida document number L16000016369.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2365 NW 70TH AVE C-10

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33122

Enter new mailing address, if applicable:

2365 NW 70TH AVE C-10

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33122

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:

Name of New Registered Agent:

MARTA M. FUERTES, CPA

New Registered Office Address:

12186 SW 131 AVENUE

Enter Florida street address

MIAMI

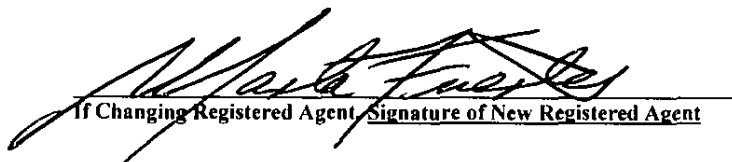
City

Florida 33186

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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------------|-----------------------------------|---|
| AMBR | MIGUEL ANGEL BARONE | VALLEJOS 4235 | <input checked="" type="checkbox"/> Add |
| | | CAPITAL FEDERAL, ARGENTINA 1419 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | LEONARDO LUIS BARONE | VALLEJOS 4237 | <input checked="" type="checkbox"/> Add |
| | | CAPITAL FEDERAL, ARGENTINA 1419 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | MARCELO LUIS DE LEO | MANUEL FRESCO 641 | <input checked="" type="checkbox"/> Add |
| | | HAEDO, PCIA BS AS, ARGENTINA 1706 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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5/1
Change
Add
Remove
Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FILED
2012-05-03 A 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA