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| (Requ | estor's Name) | |
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| (Addre | ess) | |
| (Addre | ess) | |
| (City/S | State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busin | ess Entity Na | me) |
| (Docu | ment Number |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Fili | ng Officer: | |
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Office Use Only



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J. HARRIE

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Ogmarinterracional LLC Name of Limited Liability Company |
| Dear Sir or Madam: |
| The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Elias Amadur Name of Person |
| Name of Person Vanar Internacional Firm/Company |
| 9100 s. 2 ade land suite 1500 Address |
| Micmi, I-L 33 156 City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Clias Amador at (646) 500-0331 Name of Person Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following amount: |
| \$25 Filing Fee & Certified Copy |
| INHS18 (2/14) |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Name of the Limited Lia | acional | LLC it now appears on | our records.) | | |
|--|-------------------------|--------------------------|-----------------------------|--|---|
| (Name of the Limited Lia (A Flo | rida Limited Liabili | ty Company) | , | | |
| The Articles of Organization for this Limited Liability Florida document number 2160003 | y Company were 81.66 | filed on _ O | 2-23-16 | _ and assign | ed |
| This amendment is submitted to amend the following | ; : | | | | |
| A. If amending name, <u>enter the new name of the l</u> | limited liability | company here: | | | |
| The new name must be distinguishable and contain the words " | Limited Liability C | ompany," the design | nation "LLC" or the abbre | viation 'L.L.C | 55 |
| Enter new principal offices address, if applicable: | | | . Ladeland | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | | | |
| | | Micmi | FL 3315 | <u>, </u> | |
| Enter new mailing address, if applicable: | | | | Ja | · ; |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | - 1 . | - 23 <u> </u> |
| | | | | T | <u> </u> |
| | | | | •• | 13 |
| B. If amending the registered agent and/or registered agent and/or the new registered office a | | address on ou | ır records, <u>enter th</u> | e name of | the new |
| Name of New Registered Agent: | Nanci | Torre | S land suit | | |
| New Registered Office Address: | | | | | <u> </u> |
| | Miam | | , Florida | 3156 | |
| | | 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

Page 1 of 3

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 = M $AMBR = A$ | lanager uthorized Member | | |
|--------------------|-----------------------------|--------------------|----------------|
| <u>Title</u> | Name | Address | Type of Action |
| HOR | Bells:s Rudriquez | 10916 nw 58 Tenace | 🗆 Add |
| | • | Dual F. 0 33178 | Remove |
| | | | Change |
| MGR Ramona Almanza | Mamona Almanza | 10916 nw 58 Tenace | Add |
| | | Dural FJ 33178 | Remove |
| | | | Change |
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| | | | □ Remove |
| | | | □ Change |

| 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 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Dated Typed or printed name of signce | | | | |
|---|--------------------------------|--|---------------------------------------|-----------------|
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Filing Fee: \$25.00