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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	egistration Sedivision of Corp					
// // // // //		DING USA LLC				
SUBJECT	:	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub				
		MAURICIO A GARCIA N	NINO			
			Name of Person			
		M&M BUILDING USA LI	LC			18 28
			Firm/Company		:	恶
		14146 SWANLEY ST			* * *	۴۰
			Address		-	₩ 8:
		ORLANDO, FLORIDA 3	2832			24
			City/State and Zip Code		•	
		mgarcia@eomlatam.com				
For further	information co	E-mail address: (oncerning this matter, please co	to be used for future annual report notifi	cation)		
	O A GARCIA		407 7495647			
 	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed is	s a check for th	e following amount:				
	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fili Certificate Certified ((additional c	e of Statu Copy	

MAILING ADDRESS:

TO:

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

M&M BUILDING USA LLC		
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appears on our records. da Limited Liability Company))
The Articles of Organization for this Limited Liability Florida document number L16000100111	Company were filed on 05/18/2016	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lir	nited liability company here:	. 2
OM LATAM USA LLC		1
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		<u> </u>
Principal office address MUST <u>BE A STREET ADD</u>	ORESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
8. If amending the registered agent and/or reg egistered agent and/or the new registered office ad		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flor	rida
	Cirv	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
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			Change
			☐ Remove
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00