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16 JUL 19 AM 8:10  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

JUL 21 2016  
N. GAUSSEAU

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: WISECOME HOLDING LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN A SERRAT

\_\_\_\_\_  
Name of Person

WISECOME HOLDING LLC

\_\_\_\_\_  
Firm/Company

9600 SW 8 ST, STE 2

\_\_\_\_\_  
Address

MIAMI FL 33174

\_\_\_\_\_  
City/State and Zip Code

jserrat@wisecomeholding.com

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

For further information concerning this matter, please call:

My Lai Hernandez

786  
at ( )

554-8965

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime 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**

Wisecome Holding LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
16 JUL 19 AM 8:13  
CLERK OF THE COURT  
HALL COUNTY FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/25/2016 and assigned  
Florida document number L16000101847.

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:**

**(Principal office address MUST BE A STREET ADDRESS)**

**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:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*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**

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>
MGR	Danilo Torres Roman	9600SW 8ST, Ste 2	<input checked="" type="checkbox"/> Add
		Miami FL 33174	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	L. Bruno Kamavo	Rua Dos Placeros 02 S/N	<input checked="" type="checkbox"/> Add
		Bairro Popular, 03 Luand-A	<input type="checkbox"/> Remove
		AO	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

ALL MISSISSIPPI  
STATE  
FLOIDA  
16 JUN 19 AM 8:11  
MISSISSIPPI

16 JUL 19 11 00 AM '68  
U.S. STATE  
DEPT  
WASHINGTON  
FLORIDA

ALL AMERICAN FLORIDA  
U.S. STATE  
16 JUL 19 AM 8:11

(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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

July 15

2016

Signature of a member or authorized representative of a member

Juan A. Serrat.

Typed or printed name of signee