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J. HARRIS

COVER LETTER

•	ition Sect of Corp				
SUBJECT:		NITERNATIONAL &	ted I tability Company	- 	
The enclosed Art	icles of A	mendment and fects) are subr	nitted for filing.		
Please return all c	mercspon	dence concerning this matter t	to the following:		
		JEBAS :	Name of Person		
			Film/Company		
	7207 BAY DRIVE #19				
			City/State and Zip Code		
For further infor	nation co		to be used for future annual report notif		
SCBASTIAN GAZZANI Nume of Person		at (786) 370 - 2304 Area Code Daytime Telephone Number			
		e following amount:			
២ \$25,00 Filing	g 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

INTERNATIONAL	BUSINE	SI USA LLC			
(Name of the Limited Lia (A Fig.	ability Compar orida Limited L	ny as it now appears on o liability Company)	ur records.)		
The Articles of Organization for this Limited Liabilit		were filed on02	./02/20	274_ and assigned	
This amendment is submitted to amend the following	2:				
A. If amending name, enter the new name of the	limited liabi	lity company here:			
The new name most be distinguishable and contain the words "	Limited Liabili				
Enter new principal offices address, if applicable:		7207 BAY	DRIVE #	/学 引 ·	
(Principal office address MUST BE A STREET AL	<u>DDRESS)</u>		. <u>H , FC 33</u>	//취 및 및 •	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>)</u>	7207 BAY MIAMI BCA	DR, VC # 1	FX: 19 3: 24	
B. If amending the registered agent and/or registered agent and/or the new registered office; Name of New Registered Agent:	• *	Tice address on our			
	7707	BAY DRIVE #	 (19		
New Registered Office Address:	7707 BAY DRIVE #19 Enter Florida street address				
	M;BM,	DEACH City	, Florida _	33 / 4 / Zip Code	
New Registered Agent's Signature, if changing Regist	tered Agent:				
I hereby accept the appointment as registered ag	ent and agre	ve to act in this capa	city. I further c	igree to comply w	ith the

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, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager

AMBR = z	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SEBATTIAN GARRANI	2216 Hollywood BLVD	Add
		HOLLYWOOD FL 35020	Z Remove
			Change
MGR.	SEBASTIAN GARRANI	7207 BAY BRIVE #19	_ Z Add
		MIAMI BCACH FC 33141	□ Remove
			[] Change
			_ \Add
			□ Remove
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rective date, if other than a effective date is listed, the date: If the date inserted in the cument's effective date on the control of the control of the point	his block does not in the Department of St ayed effective do	eet the applicable s ate's records.	atutory filing re	quirements, this o	late will no	it be lis	ted as
ed	(.						
	/	J. J. J.	رسر		MLIT	2017 JUN 20	com)
	Signature of a n	ember or authorized	epresentative of a	member	12 Pr 25 St	N N	
_	5 <i>E</i> D	AST,AN C	AZZANI		SS ST	20	
		Typed or printed nan	e of signee			P.	Fact 12
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		Page 3 of	I.		·		

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