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BLOSSON OF SECTION

COVER LETTER

	ision of Cor			į
SUBJECT:		ternational Company LLC		
SUBJECT.	•	Name of Lim	ited Liability Company	
The enclosed	i Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Michael Chapman		
			Name of Person	
		AOMAC Managers Inc.		
		, ar Wald	Firm/Company	
		8840 Terrene Ct #102		j
			Address	
		Bonita Springs, FL 34135		
			City/State and Zip Code	
		michael@aomac.com	to be used for future annual report not	ification)
For further in	nformation o	oncerning this matter, please of	•	
Michael Cha	apman		239 430-4310 at ()	1
	Name o	f Person		ne Telephone Number
Enclosed is a	check for t	he following amount:		
□ \$25.00 F	iling 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)
	Registr Divisio P.O. Be	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cruvisa International Company LLC	 	
(Name of the Limited Liability Compar (A Florida Limited L	iv as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000213096</u>	were filed on November 21, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		3 1
(Principal office address MUST BE A STREET ADDRESS)		2 E
		= 5 1
Enter new mailing address, if applicable:		3 3 5
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	City Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am rovided for in Chapter 605, F.S. O	familiar with and r, if this document is

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>	Type of Action
MGR	Tonjaka E. Hinkson	Flat 1 Cedar Court	■ Add
		The Drive, London England	☐ Remove
		N31AE	☐ Change
			□ Add
			□ Remove
			□ Change
			D Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove.
			Change
			Add = TT
			□ Add ☐ □ □ Remove() ☐ □ Change
			□ Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			· · · · · · · · · · · · · · · · · · ·

. 11 amendii	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	· ·	
		1
		2
		FII 10: 54
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• • • •		
(If an effective Note: If the	late, if other than the date of filing:	.0207 (3)(b) ed as the
	specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlies the day after the record is filed.	er of:
Dated	Signature of a member or authorized representative of a member	
1	Michael Chapman, Manager	
<u>-</u>	Typed or printed name of signee	

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Filing Fee: \$25.00