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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

Division of Cor			
SUBJECT:	DIGITAL	CURACAO LLC	
Subsecti	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	•	
	JE	RZY N VAN UYTRECHT	
		Name of Person	
		Fine (Company)	
		Firm/Company 1070 HARMONY LANE	
		Address	
·		CLERMONT, FL 34711	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	all:	
JERZY N VAN UYTI		at (407) 758 -	8098.
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

	L CURACAO LLC			
(Name of the Limited Liability ((A Florida Li	Company as it now appears mited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Con Florida document number	npany were filed on	12/14/2016	and ass	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company her	<u>e</u> :		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the de-	signation "LLC" or th		L.C."
Enter new principal offices address, if applicable:			33 8	*****
(Principal office address MUST BE A STREET ADDRES	<u> </u>		运动 富 第3	# f
			S	
Enter new mailing address, if applicable:	 -		OF STATE	D
(Mailing address MAY BE A POST OFFICE BOX)			EH W	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on	our records, <u>en</u>	ter the name	of the no
Name of New Registered Agent:	JERZY VA	N UYTRECHT		
New Registered Office Address:	1070 HARN	MONY LANE		
	Enter Florid	la street address	·	
	CLERMON	T, Florida	34711	
	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>	Address	Type of Action
MGRM	JERZY VAN UYTRECHT	1070 HARMONY LANE	
		CLERMONT, FL 34711	□ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add
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f an effect	ve date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 9		iling.) Purst	
documen	f the date inserted in this block does not meet the applicable statutory filing require nt's effective date on the Department of State's records.	ments, this	date will n	ot be listed a
	ord specifies a delayed effective date, but not an effective time, at 90th day after the record is filed.	12:01 a.	m. on th	ne earlier o
	12th January 2017			
Dated	13th January , 2017			
	1. V. Ithnool	.		
	Signature of a member or authorized representative of a mem	- co	- 123	mant training
	JERZY VAN UYTRECHT	から	: :25	1 }
	Typed or printed name of signee	(A 50 21-<	و.	[
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Filing Fee: \$25.00