

L17000013252

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : HINSHAW & CULBERTSON LLP
Account Number : 120110000017
Phone : 305-358-7747
Fax Number : 305-577-1063

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: MCalderon@hinshawlaw.com

2017 NOV -7 AM 10:11

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
XENEIZE SPA LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 NOV -7 AM 11:37

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XENEIZE SPA 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:

Maria M. Calderon
Name of Person

Hinshaw & Culbertson LLP
Firm/Company

2525 Ponce de Leon Blvd., 4th Floor
Address

Coral Gables, Florida 33134
City/State and Zip Code

MCalderon@hinshawlaw.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Calderon at (305) 428-5042
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
 Hilton Building
 2661 Executive Center Circle
 Tallahassee, FL 32301

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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XENEIZE SPA LLC

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

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TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/17/2017 and assigned

Florida document number L17000013252

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

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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	Lorena Hermosilla	2525 Ponce de Leon Blvd.	<input checked="" type="checkbox"/> Add
		4th Floor, Coral Gables	<input type="checkbox"/> Remove
		Florida, 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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