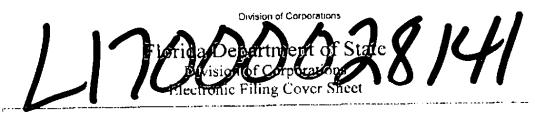
7/19/2017



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((11170001887563)))



H170001887563ABCA ,

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : F & S PROJECTS CORP

Account Number : I20120000041 : (954)482-9681 Phone : (954)482-8696 Fax Number

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

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Help O SIMMONS DIVIȘION OF CONFCAMIONS

JUL 2 0 2017

### (HI7000188756 3)

#### **COVER LETTER**

TO:		istration Sec ision of Corp			
			TERNATIONAL LLC		
SUBJ	ECT:		Name of Limit	ed Liability Company	
'Uhe er	selosec	! Articles of <i>i</i>	Arnendment and fee(s) are subn	nitted for filing.	
			ndence concerning this matter t		
			RAFAEL FERRER		
				Name of Person	
			F&S PROJECTS CORP		
			·	FimyCompany	<u></u>
			1920 N COMMERCE PAR	KWAY, STE. 1920-3	
				Address	
			WESTON, FL. 33326		
				City/Stare and Zip Code	<del>.</del>
			CONTACT@FANDSPROJ	ECTS.COM	Footbank "
				o be used for future annual report notif	ocatom)
For fo	inher i	intormation c	oncerning this matter, please or		
ŔAF	ABL F	ERRER		954 482,9681 Area Code Daytim	
		Name o	of Person	Area Code Daytim	e Telephone Number
Enclo	osed is	a check for t	he following amount:		
		Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	D \$55.00 Fitting Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certifical Copy (additional copy is enclosed)
		Regist Divisi P.O. B	ING ADDRESS: tration Section on of Corporations 30x 6327 tassee, F1.32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive C Tallahassec, FL 3	on rations coler Circle

### (H170001887563)

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	Т	RGANIZATI		OINSION OF CORE OF AM IO: 3	FILED
VIETRE INTERNATIONAL LLC				§ Z	
(Name of the Limited	l Liubility Compa A Florida Limited I	ny as it now appears of inhibitity Company)	on our records.)		,
The Articles of Organization for this Limited Lia Florida document numberL17000028141 This amendment is submitted to amend the follow		were filed on $\frac{0}{2}$	2/13/2017	and assigned	2
A. If amending name, enter the new name of	the limited liab	ility company here	<b><u>:</u></b> :		
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET	ble:		RCE PKWY, SUITE 20		
Enter new mailing address, if applicable:		2200 N COMME	RCE PKWY. SUITE 20	00, OFC # 228	
(Mailing address MAY BE A POST OFFICE BOX)		WESTON, FL. 33	1326		
B. If amending the registered agent and/or registered agent and/or the new registered off	or registered o lice <u>address he</u> r	ffice address on re:	our records, <u>enter</u>	the name of the ne	<del>ew</del>
Name of New Registered Agent:	F&S PROJEC	TS CORP			
New Registered Office Address:	1920 N COMN	MERCE PKWY, STE	E. 1920-3		
THE WELLINGTON THE THURSE.		Enter l'Iorie	da sirect address		
		WESTON	, Florida	33326 Zip Code	
		City		Tite Acuse	

#### 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 Supature of New Registered Agent

Page 1 of 3

□ Change

## (H17000188756 3)

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 = MA $AMBR = AA$	anager athorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
	<u></u>		Add
			☐ Remove
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# (H17000188756 3)

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Effective date, if other than the date is sixelicated and the date is listed, the date must be	Grand compatible once to date	e of ffling or more than 90	(optional) days after filmy.) l'user:	ми 10 605.0207 (Зиб)
IT AT THE THE MINE IS THEFT, WELL WALL STRUCK OF	goes not meet the abbitcable a	antotory liling (equirer	achis, dhis date will in	it be timed as the
If an effective date is titted, the date must be <u>Note:</u> If the date inserted in this block document's effective date on the Depar	riment of State's records.			
Note: It the date inserted in this block	nment of State's records.  Tective date, but not an	effective time, at	12:01 a.m. on th	e earlier of:
Note: If the data inserted in this block document's effective date on the Department self-entire date on the Department self-entire date on the Department self-entire date of the Political day after the record	nment of State's records.  Tective date, but not an	effective time, at	12:01 a.m. on th	e earlier of:
Note: If the data inserted in this block document's effective date on the Department record specifies a delayed effect the 90th day after the record Dated 04/19	mment of State's records.  Tective date, but not an a selective.	Anlo.		e earlier of:

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