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CRETARY OF STATE IT AHASSEE, FLORID

S. WARREN AUG 1 6 2017

COVER LETTER

TO:	08/10/17.			
SUBJE	CT.	LA CORPORATIVA	SERVICES LLC.	
SUBJE	C1:	Name of Limited	Liability Company	
The end	losed Articles of	Amendment and fee(s) are submitt	ed for filing.	
Please 1	return all correspo	ndence concerning this matter to the	he following:	
		Luis	Chiossone Name of Person	-40
		LA GRARATIL		
		5310 NW 114 A	• •	
		_ Doral _ t		
		alejandrock E-mail address: (to be	City/State and Zip Code UDSSOR 97(a) e used for future annual report notification.	Gmail.com
For furt	her information c	oncerning this matter, please call:		
	Wis (MOSSOVE Person	at (<u>186</u>) <u>86 2</u> -	-3975. e Telephone Number
Enclose	ed is a check for th	e following amount:		
\$25	5.00 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**

LA CORPORATIVA SER	NICES LLC.				
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)				
The Articles of Organization for this Limited Liability Company w	ere filed on05/15/17 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ty 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 offi registered agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter the name of the new</u>				
	_				
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

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>AMBR</u>	Marco Risquez		Add
			□ Remove
		5310 NW 114 AVE. Miami, =	t. Change
			Add
			Remove
			Change
MGR	luis Chiossone		
			□ Remove
		5310 NW 114 AVE. Mia	m'r Change
			Add
			Remove
			□ Change
<u>M6R</u>	Guillermo telipe	5310 NW 114 AVE. MINING	with production
			☐ Remove
			Change
MBR	Leonora longo	——————————————————————————————————————	☐ Add
			□ Remove
		5310 NW 114 AVE. Miarni, Fl	Change

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	the the three tire date ent's effective date of the date ent's effect of the date of the d	ve date, if other that the sective date is listed, the diff the date inserted in ent's effective date on cord specifies a degoth day after the	The Not SENIOR Thouk you so We date, if other than the date ective date is listed, the date must be sp If the date inserted in this block de ent's effective date on the Departm cord specifies a delayed effer 90th day after the record is	The Not SENIOR, the SENIOR IN 1 Thank you so much but a Chrossome. The Chrossome. The date instance in this block does not ment's effective date on the Department of Stance specifies a delayed effective degoth day after the record is filed. OB /10/17	on the system igot Im Not SENIOR, so I the SEMOR INITIALS. Thank you so much. Wis Chrissone. We date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior If the date inserted in this block does not meet the applicant's effective date on the Department of State's records. Ford specifies a delayed effective date, but no goth day after the record is filed. OS /10 117 Signature of a member or author WIS Alexandro Typed or printe	on the system 1901 set Im Not SENIOR, so I would the SENIOR INITIACS. Thank you so much. WIS Chrossone. The date is listed, the date must be specific and cannot be prior to date of filin If the date inserted in this block does not meet the applicable statutor ent's effective date on the Department of State's records. Food specifies a delayed effective date, but not an effect 90th day after the record is filed. OB /10 117 Signature of a member or authorized representations.	On the system 1904 Senior Im Not Senior, so I would like the Senior Invitacs. Thank you so much. Lys Chrossome. We date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or more than if the date inserted in this block does not meet the applicable statutory filing requient's effective date on the Department of State's records. Ford specifies a delayed effective date, but not an effective time, 90th day after the record is filed. OR 1017 Signature of a member or authorized representative of must be signed. Lys Algandro Chrossove Typed or printed name of signee	On the System 1907 Senior Mith In Not Senior Senior With In Not Senior S	Though you so wuch. We date, if other than the date of filing: We date, if other than the date of filing: We date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date went's effective date on the Department of State's records. For dispective date and the date of filing. We date inserted in this block does not meet the applicable statutory filing requirements, this date went's effective date on the Department of State's records. For dispective date on the Department of State's records. Signature of a member or authorized representative of member of signature of a member or authorized representative of member of typed or printed name of signature of signature of a printed name of signature of signature of signature of a printed name of signature of s	ON the system ight senior initials and I'm NOT SENIOR, so I would like to REMOVE the STAIOR INITIALS. Thank you so much. Wis Chiossons. We date, if other than the date of filing: We date, if oth

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Filing Fee: \$25.00