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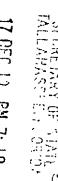
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COVER LETTER

Division	of Corp	oorations			
EL SUBJECT:	SOSPEC	CHOSO USA LLC			
30b3EC1		Name of Lim	ited Liability Company		
The enclosed Art	icles of .	Amendment and fee(s) are sub	mitted for tiling		
Please return all o	correspoi	ndence concerning this matter	to the following:		
		JOSE R GONZALEZ			
			Name of Person		-
		EL SOSPECHOSO USA I	LLC		ohone Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			Firm/Company	· · ·	_
		12523 EARNEST AVE			
			Address		-
	ORLANDO FL 32837 City/State and Zip Code				
					_
		ELSOSPECHOSOUSA@C	GMAIL.COM to be used for future annual repo	et notification	
For further inform	nation co	oncerning this matter, please co		TO HOLLING	
		meerining this matter, please co			
JOSE R GONZA			407 485-53 at ()		
	Name of	Person	Area Code [I	Daytime Telephone Numbe	: r
Enclosed is a che	eck for th	e following amount:			
S25.00 Filing	z Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certific Certifie	ate of Status & d Copy
	MAILI	NG ADDRESS:	STREET/C	OURIER ADDRESS:	

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Registration Section

TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL SOSPECHOSO USA LLC			
(Name of the Limited Liabi (A Florid	ility Company as it now appears on our records.) da Limited Liability Company)	<u> </u>	
The Articles of Organization for this Limited Liability Florida document number L17000247300	Company were filed on 12/04/2017	and assign	ned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here:		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the ab	obreviation "L.L.C	- S
Enter new principal offices address, if applicable:		7 0	
(Principal office address MUST BE A STREET ADD	DRESS)	3.	2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
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		P	<u>, ਜ</u> ਼ਿ
Enter new mailing address, if applicable:		÷.	- J
(Mailing address MAY BE A POST OFFICE BOX)	 	ရာ	- <u>5</u> m/.
			 (,,
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		the name of	the nev
Name of New Registered Agent:	······································		
New Registered Office Address:	Enter Florida street address		
	, Florida	Zin 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>	Name	Address	Type of Action
MGRM	DEIVYS D LOPEZ SUAREZ	12523 EARNEST AVE	Add
		ORLANDO FL 32837	Remove
			□ Change
	 		
			□ Remove
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`an et	ive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to		
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lient's effective date on the Department of State's records.	listed a	15
	cord specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the each $90th$ day after the record is filed.	rlier	of
	DECEMBER 7 2017		
\~ • - 1			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00