# 11800000094

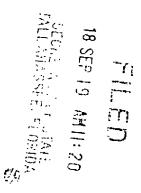
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I		

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## **COVER LETTER**

	Registration Se Division of Cor			
SUBJEC.		JSTRY LLC		
Name of Limited Liability Company				
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		PERLA SOLE CALAS		
•		<del></del>	Name of Person	<del>_</del>
		CORVO & CALAS		
•		<del></del>	Firm/Company	
		14750 SW 77TH COURT		
			Address	<u> </u>
		MIAMI LAKES FL 33016	i e	
		EALIZA BROMOGALA	City/State and Zip Code	
		FAUZIABDOU@GMAIL.		
			to be used for future annual report notifi	cation)
For further	information co	oncerning this matter, please ca	all:	
PERLA C	ALAS		305 827-0084 at ( )	
	Name of	Person	at (	Telephone Number
Enclosed is	s a check for th	e 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

FAPI INDUSTRY LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our record Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000000941</u> .	were filed on 01/02/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of</u> the limited liab	oility company here:	
LIQUIDATION USA INTERNATIONAL LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3333 NW 55 STREET	
(Principal office address MUST BE A STREET ADDRESS)	FT LAUDERDALE FLORIDA	X 33309
· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:	3333 NW 55 STREET	SEP 15
(Mailing address MAY BE A POST OFFICE BOX)	FT LAUDERDALE FLORIDA	33309
		- A 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
B. If amending the registered agent and/or registered o		enter the name of the
registered agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·
	, Flo	orida
	City	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>	<u>Name</u>	Address	Type of Action
MGR	ABDOU, FAUZI E	3333 NW 55 STREET FT LAUDERDALE FL 33309	
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			Change
			Add
			☐ Remove
			Change
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Typed or printed name of signee