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## **COVER LETTER**

TO: Registration S Division of Co					
Internation	nal Operations & Services (USA	A), LLC			
Name of Limited Liability Company					
	Amendment and fee(s) are sub	-			
Please return all corresp	ondence concerning this matter  Jarred Leibner	to the following:			
		Name of Person			
	Dufry South Florida, Inc.				
		Firm/Company			
	10300 NW 19th Street Sui	te 114			
-		Address			
	Miami, FL 33172			2018 OCT	-
	jarred,leibner@us.dufry.com			DCT 31	
For further information of	E-mail address: (concerning this matter, please co	to be used for future annual report notifi all:	cation)	<b>P# 9:</b>	( )
Jarred Leibner		305 591-1763 at ()			
Name o	of Person	Area Code Daytime	Telephone Number		
inclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	e of Status &	

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

International Operations & Services (USA), I	LLC		
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)		•
The Articles of Organization for this Limited Liability Conference of Community Conference of L18000030679	ompany were filed on 02/01/2018	and a	ssigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company here:		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the	abbreviation <sup>*</sup>	L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regist		r the mam	Cof the new
registered agent and/or the new registered office adda	ress here:		
		SS:	<u>ω</u>
Name of New Registered Agent:		more a	
		(.	1 1
New Registered Office Address:		<u> </u>	م ا
	Enter Florida street address	<u> </u>	រដ្ឋ ទាំ
	Florida		
	City	Zip Coa	(, <u> </u>

## 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>	<u>Address</u>	Type of Action
MGR	Patricia Moore	10300 NW 19TH ST STE 114	<b>5</b>
		MIAMI, FL 33172	
			Remove
		·	Change
MGR	Maria Magdalena Izurieta	10300 NW 19TH ST STE 114	_
<del></del>		MIAMI, FL 33172	<b>=</b> Add
			Remove
			Change
AMBR	Walter Acevedo	10300 NW 19TH ST STE 114	
	(Vice - President)	MIAMI, FL 33172	
	( via ( )		□ Remove
			Change
AMBR	Maria Magdalena Izurieta	10300 NW 19TH ST STE 114	201
	(Secretary)	MIAMI, FL 33172	Adb Adc 3
			Remove !
			Company Committee
AMBR	Rene Riedi	10300 NW 19TH ST STE 114	환수 <b>69</b>
<del></del>	(Prisident)	MIAMI, FI. 33172	<b>=</b> Add
			Remove
			☐ Change
AMBR	LUIS HADIA	10300 NW 19TH ST STE 114	<b>=</b> Add
	Triasurir	MIAMI, FL 33172	
			Remove
			Change

and Maria Magdale	na Izurieta. Please remove	Patricia Moore a	nd add Maria Magda	lena Izurieta.		
AMBR / Officers -	The Officers of the compar	ny are: Rene Riec	i (President),	<del>-</del>		
Walter Acevedo (V	ice-President), Luis Otaola	(Treasurer), and	Maria Magdalena Iz	urieta (Secretar	iÀ)	
Please add the offic	ers.					
			<del>-</del> .	<del></del>		
		-		<del>-</del>	<del> </del>	
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effective date is listed, the content of the date inserted attentive date attention of the content of the conte	than the date of filing: _ the date must be specific and ear in this block does not meet on the Department of State delayed effective date the record is filed.	t the applicable st e's records.	atutory filing require	ements, this dat	g.) Pursuan le will not	be lis
	· -		( M	,		
	Signature of a men	aber or authorized (	epresentative of a men	iber		

Page 3 of 3

Filing Fee: \$25.00