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## **COVER LETTER**

TO: - Registration Section Division of Corporations

MAYA INTERNATIONAL LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JULIO SNITCOVSKY

Name of Person

MAYA INTERNATIONAL LLC

Firm/Company

1560 S DIXIE HWY SUITE 210

Address

CORAL GABLES, FL 33146

City/State and Zip Code

julio@intertechrail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIO SNITCOVSKY

Name of Person

305 278-2788 at (\_\_\_\_\_) Area Code Davi

Englosed is a check for the following amount:

S25.00 Filing Fee

S30.00 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

Daytime Telephone Number

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### MAYA INTERNATIONAL LLC

#### (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on FEB. 15, 2018 \_\_\_\_\_\_ and assigned Florida document number L18000042329

This amendment is submitted to amend the following:

## A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

## 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 r registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		<u></u>
	Enter Florida street address	
_	, Flori	da
	Cuv	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. Thereby 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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ADOLFO BOBROW	1560 S DIXIE HWY SUITE 210	🗆 Add
		CORAL GABLES, FL 33146	Remove
			Change
<u> </u>			Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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# E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional) (If an effective 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	FEBRUARY 22	2018	
		futures	
		Signature of a member or authorized representative of a member	
	JULIO SNITCOVSK	Y	

Typed or printed name of signee

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Filing Fee: \$25.00