

	(Requestor's Name)	
	(Address)	
	(Address)	_
 	(City/State/Zip/Phone #)	
PICK-UI	P WAIT MAIL	
	(Business Entity Name)	_
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions	s to Filing Officer:	
·	-	
 _		_

Office Use Only



000310439040

03/19/18--01039--007 **25.00

HILED

18 MAR 19 AH 9 22

SECRETARY OF STATE OF THE PROPERTY O

O SIMMONS

COVER LETTER

	Registration Se Division of Cor			
SUBJECT		ernational LLC		
SUBJECT	• •	Name of Lim	ited 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:	
		Eric Gordon		
			Name of Person	
		Usinbia International LLC		
			Firm/Company	
		6285 Chasewood Drive Un	nit F	
		· · · · · · · · · · · · · · · · · · ·	Address	
		Jupiter Florida 33458		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		dancingpotato@hotmail.com		
		E-mail address: (to be used for future annual report notif	ication)
For further	r information co	oncerning this matter, please ca	ıll:	
Eric Gord	lon		561 3174595	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed i	is a check for th	ne 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

Usinbia International LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records. Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on March 07, 2018	and assigned
Florida document number 1.18000060054		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	/
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	/	
(Principal office address MUST BE A STREET ADDRESS)	/	100 美工
Enter new mailing address, if applicable:		10 0
(Mailing address MAY BE A POST OFFICE BOX)		7.
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records,	enter the name of the n
Name of New Registered Agent:	/	
New Registered Office Address:	/February Management	
	Enter Florida street address	
	, Flori	ida 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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR =	Manager 🔧	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Remove
			B Change
			D'Add O
			E Remove
		/	TOTAL ED AME 9: 22 Bremove 9: 22 Change
	···		□ Add
		/	□ Remove
			Add
			□ Remove
			□ Change

It was spelled w	rong and should now	read Jessica (Qu.			
Thank You.						
-						
						- -
	<u>-</u>			<u>. </u>	<u></u>	
						
						
			· · · · · · · · · · · · · · · · · · ·		<u> </u>	- 3 -
			· · · · · · · · · · · · · · · · · · ·		57	: ²⁰ F
					(1) (1)	
						9.
					ල ව	22
fective date, if oth	er than the date of	filing:	·		(optional)	
ote: If the date inser	d, the date must be speci rted in this block does late on the Departmen	s not meet the	applicable statut	ory filing requireme	nts, this date will	uant to 605.02 not be listed:
record specifies	s a delayed effect ter the record is f	tive date, be	ut not an effe	ctive time, at 13	2:01 a.m. on t	he earlier
ned <u>Mara</u>	·416		018.			
ζ		onlo	V			
	Signatur	e of a member of	r authorized repre	sentative of a member		

Page 3 of 3

Filing Fee: \$25.00