H8000 292 150

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

Office Use Only



100324182861

02/07/13--01012--020 .*****≉55.00





COVER LETTER

	legistration Se Division of Cor		•	•
SUBJECT		national USA, LLC		
30Dáne i	•	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:	
		Tucker J. Thoni		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		GrayRobinson, P.A.		
			Firm/Company	
		301 East Pine Street, Suite	1400 Attn: Tucker J. Thoni	
			Address	
		Orlando, FL 32801		
		Tucker.Thoni@gray-robins	City/State and Zip Code on.com	····
		E-mail address: (to be used for future annual report not	ification)
For further	r information co	oncerning this matter, please co	all:	
Tucker J.	Thoni		407 244-5627	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed i	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 ARTICLES OF ORGANIZATION FILED

2019 FEB -7 AM 10: 53

WAM International USA, LLC

(Name of the Limited Liability Company as it now appears on our records:) SSET CITED (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number 1.18000292750	were filed on 12/21/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7751 Kingspointe Parkway	s, Suite 122
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32819	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7751 Kingspointe Parkway Orlando, FL 32819	s, Suite 122
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	dress
		Florida
	City	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_being addedor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGŔ	PEREIRA, VINCIUS M	7751 KINGSPOINTE PARKWAYS, SUITE 122	Add
		ORLANDO, FL 32819	
			■ Remove
			☐ Change
MGR	PEREIRA, VINICIUS M	7751 KINGSPOINTE PARKWAYS, SUITE 122	Add
		ORLANDO, FL 32819	
			Remove
			Change
			Add
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			Change

	1/1/2010
Effect	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 605.0207
if an ei Note:	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 605.0207 in the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
	nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of: 90 th day after the record is filed.
1110	s 90th day after the record is med.
Datad	1/31/2019
Dateu	
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Miguel Kaled
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00