## L19000024982

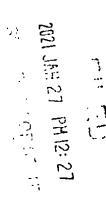
(Re	equestor's Name)	_
(Ad	idress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	пе)
(Do	ocument Number)	i e
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300358984333

01/27/21--01019--009 ••25.00



R 3/2/21

## **COVER LETTER**

Registration Section
Division of Corporations

**)**:

влест:		EES & SUPPORT USA, ELC. *	<b>.</b>
,	Name of Lin	nited Liability Company	. 0
e enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
	ondence concerning this matter	_	
		ANDREINA OLARTE	
		Name of Person	
	IND	USTRIAL SERVICES & SUPPO	ORT USA, LLC.
		Firm/Company	
		851NW 79 AVENUE, SUITE 7	
	<del> </del>	Address	——————————————————————————————————————
		MIAMI, FL. 33166	
	<del></del>	City/State and Zip Code	· <del>-</del>
	Rochau E-mail address:	/優iss-ca. cong to be used for future annual report no	otification)
further information c	concerning this matter, please c	all:	
ANDREIN	A OLARTE	305 at ( )	302-5388
Name o	of Person		me Telephone Number
closed is a check for the	he 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 S Division of C P.O. Box 632 Tallahassee. 1	Section Corporations 27	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INDUSTR	TAL SERVICES & SUPPORT USA, I	JIJC.	
( <u>Name of the Limi</u>	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
		A1/32/3010	
Articles of Organization for this Limited L		0172372017	and assigned
ida document numberL19000024982	·		
amendment is submitted to amend the following	owing:		
If amending name, <u>enter the new name o</u>	of the limited liability company he	<u>re</u> :	
new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
er new principal offices address, if applic	cable:		
	·	<del>.</del> .	
ncipal office address MUST BE A STREI	<u> </u>		
er new mailing address, if applicable:			
• •			<del></del>
<u>illing address MAY BE A POST OFFICE</u>	<u>BOX)</u>	<del></del>	
If amending the registered agent and/or a	registered office address on our re	cords, enter the nar	ne of the new regist
nt and/or the new registered office addre	~:	, <u></u>	
	<del></del>		
Name of New Registered Agent:	WILSON H. ROCHA		
New Registered Office Address:	4851 NW 79 AVENUE SUITE 7		2021
	Enter Flori	da street address	-1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -
	MIAMI	m	3166

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is reing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

lew Registered Agent's Signature, if changing Registered Agent:

City

If Changing Registered Agent Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

## IGR = Manager MBR = Authorized Member

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
1GR	ANDREINA OLARTE	8065 SW. 107 AVENUE APT. 117	□ Add
		MIAMI, FL. 33173	<b>≡</b> Remove
			□Change
AMBR	RUBEN SALAS	4851 NW 79 AVENUE SUITE 7	□Add
		MIAMI. FL. 33166	Remove
			□ Change
AMBR	EDUAR LOPEZ GAVIRIA	4851 NW 79 AVENUE SUITE 7	<b>=</b> Add
		MIAMI, FL. 33166	□Remove
		<del></del>	☐ Change
			□Add
			□Remove
			□Change
		<del> </del>	□ Add
			□Remove
		·=	☐ Change
<u></u>	<del></del>		□Add
			□Remove
			□Change

4.						
						_
		<del></del>		·····		
		-				
<del></del>						_
			<u> </u>	<del></del>		
					12.	_
		<del></del>		<del></del> _		_
						<del></del>
in effective date o <mark>te:</mark> If the da	, if other than the date of filing e is listed, the date must be specific and te inserted in this block does not m ective date on the Department of St	cannot be prior to ect the applicab	date of filing or me	ore than 90 days aft		
ecord specific is filed.	es a delayed effective date, but not a	an effective time	e, at 12:01 a.m. c	on the earlier of:	(b) The 90th day a	fter the
ted	JANUARY 21	2021	. , .			
		C J	12R			
	Signature of a m	iember or authori	zed representative	of a member	· · · · · · · · · · · · · · · · · · ·	
		WILSON H	. ROCHA			
		Typed or printed		-		