Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : I20180000102 Phone : (305)406-3800 : (305)406-3999 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **COASTEC USA LLC**

Certificate of Status	0
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Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COASTEC USA LLC		
(Name of the Limited Limited Com. (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on	and assigned
Florida document number L21000273300		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	hility Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
Principal office address MUST BE A STREET ADDRESS		
		202 SE TAL
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		32 2
B. If amending the registered agent and/or registered offic	e address on our records, enter the	name of the new regist
agent and/or the new registered office address here:		
		6 0 A
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florid	я
	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.

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			<u>"-</u>		·· <u>·</u>
If an effective date is Note: If the date i	other than the date of fit listed, the date must be specific inserted in this block does not be date on the Department of	ot meet the applical	^ mmin ormm0 or	(option ore than 90 days after fi g requirements, this	
ne record specifies and is tiled.	a delayed effective date, but	not an effective tin	ae, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
	June 16				
	11 6				
lo	se / Terrianded				
	se A. Fernandez . Signature o	of a member or author	rized representative	of a member	

Filing Fee: \$25.00

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>	Name	Address	Type of Action
MGR	Jose Angel Fernande2	1000 E Island Blvd	= Add
		Aventura Fl 33160	Петюve
			☐ Change
			□Add
			□Remove
			Change
			2 <u>2</u> JU □SECRE TALL AH
			CRETANY O
			NASSEE FLORIDA
		<u> </u>	□ Remove
			☐ Change
			□ Remove
			☐ Change
			□Add
			Remove