

L23000049201

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

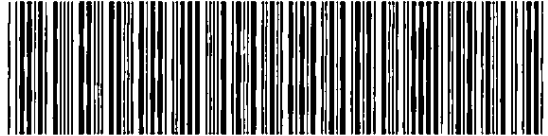
(Business Entity Name)

(Document Number)

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2023 AUG 16 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FL

Y. SCOTT
SEP 13 2023



Restrepo & Associates, LC

Certified Public Accountants

Member:
Florida Bar Association

2600 S Douglas Road, Suite 913
Coral Gables, Florida 33134

Telephone: (305) 447-9430
Telefax: (305) 448-5541

E-Mail: diego@restrepolaw.com

Member:
Florida Institute of Certified
Public Accountants

August 7th, 2023

Via U.S. Postal Service
Certified Mail Receipt
Tracking No. 7022 3330 0001 2882 9194

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FL

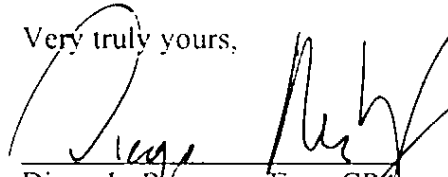
RE: MACLAMA USA LLC (the "Company")
Amendment to Articles of Organization of the Company

To Whom It May Concern:

Enclosed please find Articles of Amendment to Articles of Organization of MACLAMA USA LLC dated August 7th, 2023 (the "Articles of Amendment") and check No. 2140 in the amount of US\$ 25.00 to cover the filing of the Articles of Amendment.

Should you have any questions regarding this letter or any of its enclosures, please do not hesitate to contact the undersigned at (305) 447-9430.

Very truly yours,


Diego L. Restrepo, Esq., CPA
Florida Bar License No. 0178012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MACLAMA USA LLC

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:

RAFAEL BARRERA

Name of Person

DIEGO L RESTREPO P.A.

Firm/Company

2600 SOUTH DOUGLAS ROAD SUITE 913

Address

CORAL GABLES, FL. 33134

City/State and Zip Code

RAFAEL@RESTREPOLAW.COM

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

SECRETARY OF STATE
TALLAHASSEE, FL

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For further information concerning this matter, please call:

RAFAEL BARRERA

305 447-9430
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MACLAMA USA 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 01/26/2023 and assigned
Florida document number 1.23000049201.

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 "L.L.C."

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)

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TALLAHASSEE, FL

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	INTERNATIONAL ADVISORS	2600 S DOUGLAS ROAD SUITE 913	<input type="checkbox"/> Add
	SERVICE LLC	CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(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)

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.

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

DIEGO L. RESTREPO, ESQ., AS AUTHORIZED REPRESENTATIVE OF A MEMBER

Typed or printed name of signee

Filing Fee: \$25.00