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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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SYSTEM OF CONFIRMATION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LATAM TELECOMMUNICATIONS, L.L.C.

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROSSMERY PIRKAU

Name of Person

LATAM TELECOMMUNICATIONS, L.L.C.

Firm/Company

3350 SW 148TH Avenue, Suite 400

Address

Miramar, FL 33027

City/State and Zip Code

USAREGULATORY@USCLARO.COM

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

For further information concerning this matter, please call:

ROSSMERY PIRKAU

at (305) 5861685

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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RECEIVED
DIVISION OF CORPORATIONS

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: LATAM TELECOMMUNICATIONS, L.L.C.

Enter new principal office address, if applicable: _____

**(Principal office address
MUST BE A STREET ADDRESS)**

3350 SW 148TH AVENUE, SUITE 400

MIRAMAR, FL 33027

Enter new mailing address, if applicable: _____

**(Mailing address
MAY BE A POST OFFICE BOX)**

2. The Florida document number of this limited liability company is: M11000005546

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 11/02/2011

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: CSC - CORPORATION SERVICE COMPANY

New Registered Office Address: 1201 HAYS STREET

Enter Florida Street Address

TALLAHASSEE

City

Florida 32301

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.

Sonyia Cordell

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

Please remove the Managers below & replace them with the Managers listed in the additional page (see attached)

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	ROBERT BUZNEGO	9700 NW 112TH AVE, MIAMI, FL 33178	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Manager	EDUARDO DIAZ CORONA	EDUARDO DIAZ CORONA	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Manager	ALEX PIS-DUDOT	9700 NW 112TH AVE, MIAMI, FL 33178	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Manager	GUSTAVO BLANCO	9700 NW 112TH AVE, MIAMI, FL 33178	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Manager	PEDRO DOMIT PALAZEULOS	9700 NW 112TH AVE, MIAMI, FL 33178	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

LUIS SEGOVIA

Typed or printed name of signee

Filing Fee: \$25.00

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DIVISION OF CORPORATIONS

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

As mentioned in the previous page, add the following persons as the new Managers or Officers of the Company.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	CORI REITMAN	3350 SW 148TH AVE. SUITE 400 MIRAMA	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
Manager	LUIS SEGOVIA	3350 SW 148TH AVE. SUITE 400 MIRAMA	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
Officer	ARTURO PELLERANO	3350 SW 148TH AVE. SUITE 400 MIRAMA	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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DIVISION OF CORPORATE & COMMERCIAL AFFAIRS
STATE OF FLORIDA

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

LUIS SEGOVIA

Typed or printed name of signee