

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

Phone:

Account Name : HARVARD BUSINESS SERVICES, INC.

Addount Number : I20030000045 Fhone : (302)645-7400

: (302)645-1280 Fam Number

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

Email Address: mh@mhub.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SCRIPT SHOP MIAMI LLC

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

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Script Shop Miami LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: December 1, 2014
SECTION II (4-7 complete only the applicable changes)
4. New name of the limited liability company: (mast contain "Limited Liability Company, ""L.L.C." or "L.L.C.")
(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.")
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Thomas Kato, Managing Member 1680 Michigan Ave, Suite 800, Miami Beach, FL 33139
Sergio Carreno, Member 1680 Michigan Ave, Suite 800, Miami Beach, FL 33139
7. Attached is an original 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
Signature of the authorized representative
DERGIO CARRENO Oped or printed name of signec
Typed or printed name of signee
Filing Fee: \$25.00