

# LO90000068981

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : ACCOUNTANT & MANAGEMENT INC  
Account Number : 120110000070  
Phone : (305) 541-3980  
Fax Number : (305) 541-7033

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

Email Address: \_\_\_\_\_

RECEIVED  
14 JUN -4 PM 4:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
RETAIL SERVICES LATAM, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUN -4 PM 3:07

FILED

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RETAIL SERVICES LATAM, 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:

MOSES NAE  
Name of Person  
ACCOUNTANT & MANAGEMENT INC  
Firm/Company  
1549 NE 123RD ST  
Address  
NORTH MIAMI, FL 33161  
City/State and Zip Code  
INFO@TAXLEAF.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MOSES NAE at 305 541-3980  
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/COURIER ADDRESS:  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**H14000130743 3**  
**ARTICLES OF AMENDMENT**  
**TO**  
**ARTICLES OF ORGANIZATION**  
**OF**

**FILED**  
14 JUN -4 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RETAIL SERVICES LATAM, 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 07/17/2009 and assigned Florida document number L09000068981.

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 end with the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 1549 NE 123RD ST  
NORTH MIAMI, FL 33161  
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 5701 COLLINS AVE APT 1411  
MIAMI, FL 33140  
(Mailing address MAY BE A POST OFFICE BOX)

**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: ACCOUNTANT & MANAGEMENT INC

New Registered Office Address: 1549 NE 123RD ST

Enter Florida street address

NORTH MIAMI, Florida 33161

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.*

  
If Changing Registered Agent, Signature of New Registered Agent

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**If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
<u>MGR</u>	<u>Ron King Management LLC</u>	<u>5701 COLLINS AVE APT 1411</u>	<input type="checkbox"/> Add
		<u>MIAMI, FL 33140</u>	<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>DADDY GROUP CORP</u>	<u>FLEMMING HOUSE, WICKHAMS CAY 1, 5TH FLOOR</u>	<input checked="" type="checkbox"/> Add
		<u>TORTOLA, BRITISH VIRGIN ISLANDS VG 1110</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input 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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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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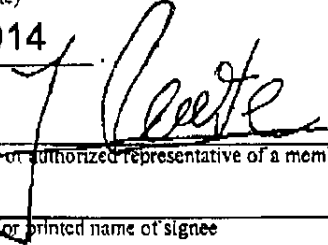
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JUNE 2ND 2014



Signature of a member or authorized representative of a member

**JORGE VICENTE**

Typed or printed name of signee