

L 13000025473

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
MAY - 8 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RIBEIRO INTERNATIONAL INVESTMENTS 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:

CARLA FERNANDEZ

Name of Person

Firm/Company

5007 FAIRHAVEN LN

Address

NAPLES, FL 34109

City/State and Zip Code

CARLA.DFCMEDIA@COMCAST.NET

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

For further information concerning this matter, please call:

CARLA FERNANDEZ

Name of Person

at (239) 287-7726

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
13 MAY -7 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RIBEIRO INTERNATIONAL INVESTMENT
(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 02/19/2013 and assigned
Florida document number L13000025473

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SAME NAME

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5007 FAIRHAVEN LN
NAPLES, FL 34109

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME ADDRESS

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:

CARLA FERNANDEZ

New Registered Office Address:

5007 FAIRHAVEN LN

Enter Florida street address

NAPLES

City

Florida

34109

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 608, 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CARLA FERNANDEZ	5007 FAIRHAVEN LN	☒ Add
		NAPLES, FL 34109	☐ Remove
MGR	SEBASTIAO FRANCO	RUA CAPITAO LEONIDIO	☒ Add
	BRASIL	SADES, 209 PLANALTO	☐ Remove
		BELO HORIZONTE, BRASIL 31.720-590	
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

<u>LUIZ ANTONINO MANCOSO RIBEIRO</u>	<u>20%</u>
<u>LUIZ FILIPE DA SILVA RIBEIRO</u>	<u>20%</u>
<u>CARLA FERNANDEZ</u>	<u>20%</u>
<u>SEBASTIÃO FRANCO BRASIL</u>	<u>40%</u>

Dated MAY 02, 2013.

Luiz Felipe da Silva Ribeiro

Signature of a member or authorized representative of a member

LUIZ FELIPE DA SILVA RIBEIRO

Typed or printed name of signee

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Filing Fee: \$25.00