

U4000015281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

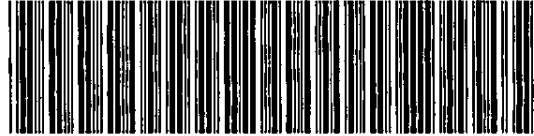
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 21 2015  
S. YOUNG

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: SPEEDMAQ GROUP 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:

MARIA C SOUSA

Name of Person

SOUSA & ASSOCIATES INC

Firm/Company

PO BOX 618348

Address

ORLANDO, FL 32861-8348

City/State and Zip Code

carol@sousanassociates.com

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

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For further information concerning this matter, please call:

MARIA C SOUSA

Name of Person

at ( 407 ) 342-6382

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



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>
MGRM	BOTTINI PINTO, CAROLINA	230 LAS FUENTES	<input type="checkbox"/> Add
		KISSIMMEE, FL 34746	<input checked="" type="checkbox"/> Remove
MGR	SPEEDMAQ INDUSTRIA E COMERCIA DE MAQUINAS	RUA SAGUIRU 411	<input type="checkbox"/> Add
		CASA VERDE SAO PAULO	<input checked="" type="checkbox"/> Remove
		SAO PAULO BRASIL 02514-000	
MGRM	CLAUDIO ANTONIO PINTO FILHO	RUA CAYOWA 854, APT. 142	<input checked="" type="checkbox"/> Add
		SAO PAULO, SP 05018-001 BRASIL	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<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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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 September 15, 2015

x 

Signature of a member or authorized representative of a member

Carolina Bottini Pinto

Typed or printed name of signee

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Filing Fee: \$25.00

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