

L14000118480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

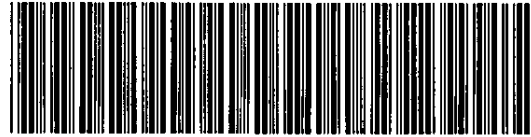
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 15 2014



Miami, August 06, 2014

CODE: 2381

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Top Boat LLC – L14000118480
ARTICLES OF AMENDMENT TO ARTICLES ORGANIZATION

Dear Sir or Madam:

Please find attached the following documents regarding the above mentioned:

- 1) Cover Letter & Articles of Amendment to Articles of Organization dully signed
- 2) Check number # ¹⁰⁰² from Citibank in the amount of \$25.00 as payment fee

Please feel free to contact me for any additional information.

Thank you very much for your special attention to this request.

Very truly yours,

InterCorp Internacional Group
Carolina Ribeiro

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TOP BOAT 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 07/28/2014 and assigned
Florida document number L14000118480

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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



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>
MGR	JOSE CARLOS VALENTE PONTES	150 SE. 2ND AVE., STE 808, MIAMI, FL 33131	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	CAROLINA RIBEIRO	801 BRICKELL AVE., STE. 926, MIAMI, FL 33131	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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 _____, _____.



Signature of a member or authorized representative of a member

JOSE CARLOS VALENTE PONTES

Typed or printed name of signee

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Filing Fee: \$25.00

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