

L17000152056

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 : ALPHA BUSINESS CONSULTING, LLC
Account Number : I20080000061
Phone : (407)582-9830
Fax Number : (407)294-7677

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
G1 BUSINESS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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2017 JUL 31 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 JUL 31 AM 9:32

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GI BUSINESS, 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 PINHEIRO

Name of Person

7022 CARLENE DR

Firm/Company

ORLANDO, FL 32835

Address

(407)582-9830

City/State and Zip Code

pinheiro maria@att.net

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

For further information concerning this matter, please call:

MARIA PINHEIRO at (407) 582-9830

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)

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2017 JUL 31 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G1 BUSINESS, 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 07/14/2017 and assigned
Florida document number L17000152056.

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 contain 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) _____

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	BRUNO MURTINHO MORAES	RUA TREZE DE MAIO 162/402	<input type="checkbox"/> Add
		PETROPOLIS, RJ 25685-230 BR	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HERMANN HELINSKI ARAUJO	RUA PRESBITERO PG ARAUJO	<input type="checkbox"/> Add
		1568 TORRE A # 1202	<input checked="" type="checkbox"/> Remove
		NATAI RN 59082-420 BR	<input type="checkbox"/> Change
MGR	HHEP BUSINESS LLC	1950 HUGHES LANDING BLVD	<input checked="" type="checkbox"/> Add
		UNIT 528	<input type="checkbox"/> Remove
		THE WOODLANDS, TX 77380	<input type="checkbox"/> Change
MGR	SCHALTRI REAL STATE	1950 HUGHES LANDING BLVD	<input checked="" type="checkbox"/> Add
		UNIT 528	<input type="checkbox"/> Remove
		THE WOODLANDS, TX 77380	<input type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 STATE BAR OF FLORIDA
 TALLAHASSEE, FL 32301

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

THE COMPLETE NAME OF MGR TO BE ADDED IS:

SCHALTRI REAL STATE BUSINESS MANAGEMENT LLC

Multiple horizontal lines for additional amendments.

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DEPARTMENT OF STATE
ALLAHBASSE, FLORIDA
FILED

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JULY 28 2017

Signature of a member or authorized representative of a member

ALEXANDREA MASTANDREA

Typed or printed name of signee