L13000132755

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(Re	equestor's Name)	
(Ac	idress)	
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(Cil	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
00)	ocument Number)	
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09/30/13--01039--002 **30.00



COVER LETTER

TO: Registration Section
Division of Corporations

SLSG MARKETING 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:

CAROLINE G LARSON

Name of Person

LARSON ACCOUNTING & CONSULTING SERVICE LLC

Firm/Company

8615 COMMODITY CIRCLE STE 06

Address

ORLANDO, FL 32819

City/State and Zip Code

FINANCES@LARSONACC.COM

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

For further information concerning this matter, please call:

CLEITON CARDOSO

...407、3703686

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2013 SEP 30 AM 10: 31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Zip Code

SLSG MARKETING, LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 09/15/2013 and assigned
Florida document number L13000132755	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	oility company here:
SGOMES MARKETING, LLC	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
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 of registered agent and/or the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	
-	Enter Florida street address

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.

City

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				
Title.	<u>Name</u>	Address	Type of Action	
			Add	
			Remove	
			_	
			Add	
			Remove	
			Add	
			Remove	
			Add	
			Add	
			Remove	
			Add	
			_	

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
•	
•	
-	
ted	SEPTEMBER 25, 2013.
	SERGIO LUIZ DE SOUZA GOMIS
	Signature of a member or authorized representative of a member
	SERGID LUIZ DE SOUZA GOMES Typed or printed name of signee
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

