

L15000036071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

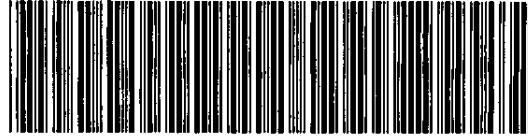
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800270853418

04/02/15--01012--021 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 APR -2 PM 2:05

C.L.
4-20-15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CGZ INTERNATIONAL, 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:

FULTON ABRAHAM CPA

Name of Person

FAS CPA & CONSULTANTS

Firm/Company

9010 SW 137 Ave Suite 201

Address

MIAMI FL 33186

City/State and Zip Code

sabram7@gmail.com

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

For further information concerning this matter, please call:

FULTON ABRAHAM CPA

305 332-3898

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 APR -2 PM 2: 05

CGZ INTERNATIONAL, 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 02/26/2015 and assigned
Florida document number L15000036071.

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)

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

City

, Florida

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>
GMGR	Eulises Caraballo Larez	Carrera Buenos Aires Casa # 11	<input checked="" type="checkbox"/> Add
		Campo B2 Ferrominera, Puerto Ordaz	<input type="checkbox"/> Remove
		Estado Bolívar, Venezuela	
MGR	Ulises Caravallo Larez	CARRERA BUENOS AIRES CASA # 11	<input checked="" type="checkbox"/> Add
		PUERTO ORDAZ, BO 8050 VE	<input checked="" type="checkbox"/> Remove
GMGR	Gonzalo Garcia Meneses	Urbanización Roraima, Calle Bompland	<input checked="" type="checkbox"/> Add
		#15 Mz. 11 Alta Vista, Puerto Ordaz	<input type="checkbox"/> Remove
		Estado Bolívar, Venezuela	
MGR	Gonzalo Garcia Meneses	URB. RORAIMA, CALLE BOMPLAND	<input type="checkbox"/> Add
		#15 Mz. 11	<input checked="" type="checkbox"/> Remove
		PUERTO ORDAZ, BO 8050 VE	
GMGR	Fermin Antonio Zacarias	Avenida Atlántico, Urbanización	<input checked="" type="checkbox"/> Add
		Terrazas Del Atlántico, Calle 11	<input type="checkbox"/> Remove
		No. 11-7, Puerto Ordaz Estado Bolívar	
MGR	Fermin Antonio Zacarias	380 SW 4TH STREET APT. # 5	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove

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

Article VI. The Nature of Company Business is Import & Export

Article VII. The Participation of each partner is as follows:

FERMIN A ZACARIAS 33.33%

EULISES CARABALLO LAREZ 33.33%

GONZALO GARCIA MENENDEZ 33.33%

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

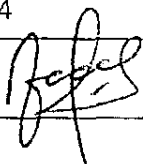
15 APR -2 PM 2:05

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 MARCH 24 2015

✓



Signature of a member or authorized representative of a member

FERMIN A ZACARIAS

Typed or printed name of signer