

L16000126115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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WALKER



Miami, July 12, 2016

CODE: 2542

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Ref: INTERCORP GROUP LLC - FL Document Number - L16000126115

Dear Sir or Madam:

Please find attached Form "Amendment to Articles of Organization" related to the above referenced.

Please also find attached check #1079 from Citibank for \$25.00 for the required fee.

Please feel free to contact us for any other information should it be necessary.

Cordially,

A handwritten signature in black ink, appearing to read "Carolina Ribeiro", written over a horizontal line.

Carolina A Ribeiro

InterCorp International Group
150 SE 2nd Avenue, Suite #808
Miami, FL 33131
Ph: 305-371-2858
carolina@intercorpgroup.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INTERCORP 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:

CAROLINA RIBEIRO

Name of Person

INTERCORP GROUP LLC

Firm/Company

150 SE 2ND AVE, STE 808

Address

MIAMI, FL 33131

City/State and Zip Code

carolina@intercorpgroup.com

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

For further information concerning this matter, please call:

CAROLINA RIBEIRO

Name of Person

at **(305) 371-2858**

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**

INTERCORP GROUP 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 07/01/2016 and assigned
Florida document number L16000126115.

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

_____, **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	CAROLINA RIBEIRO	150 SE 2ND AVE, STE 808	☐ Add
		MIAMI, FL 33131	☒ Remove
MGR	LEONARDO BRAUNE	150 SE 2ND AVE, STE 808	☒ Add
		MIAMI, FL 33131	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
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			☐ Add
			☐ Remove

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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 JULY 12, 2016



Signature of a member or authorized representative of a member

CAROLINA RIBEIRO

Typed or printed name of signee

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CLERK OF COURT
TALLAHASSEE, FLORIDA