## 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 : BARBOSA LEGAL Account Number : I20110000049 : (305)501-4680 Phone Fax Number : (305)359-9543

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

RENEWALS@BARBOSALEGAL.COM Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GREEN BIOFUELS MIAMI LLC

Certificate of Status	0
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Corporate Filing Menu

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## **COVER LETTER**

Name of Limited Liability Company

TO: Registration Section
Division of Corporations

SUBJECT: GREEN BIOFUELS MIAMI LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruna Barbosa
Name of Person
Barbosa Legal
Firm/Company
407 Lincoln Road PH-NE
Address
Miami Beach, FL 33139
City/State and Zip Code
renewals@barbosalegal.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruna Barbosa	<sub>at</sub> 305, 9	501-4680	
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) ☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 08/07/18 06:03PM EDT Barbosa Legal -> Division of Corporations

## (((H18000230415 3))) ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GREEN BIOFUELS MIAN		
(Name of the Limi	ied Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited L Florida document number L13000107261		
Florida document number = 10000,0120.	<del></del> '	
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name o	f the limited liability company her	<u>re</u> :
•		
The new name must be distinguishable and end with the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	:able:	
(Principal office address MUST BE A STREE		291
		A A
	<del></del>	<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	ROX	7 P 1:
Maning marcis MAT BE AT OUT OF THE		?
		### <b>#</b>
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the name of the r
Name of New Registered Agent:	N/A	
New Registered Office Address:	<del></del>	
	Enter Flori	da 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

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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>	Address	Type of Action
MGR	Celso Olivatto	3123 NW 73rd St Suite 0	C Add
		Miami FL 33147-5947	■ Remove
MGR	Edilson Bianconi	3123 NW 73rd St Suite C	Add
		Miami FL 33147-5947	Remove
MGR	Fabio H. de Almeida Santos	3123 NW 73rd St Suite (	 D_⊟ Add
		Miami FL 33147-5947	🗆 Remove
			Add
			Remove
			□ Remove
			_ □ Remove

	06:03PM EDT Barbosa	_			Pg 5/
D. If a	mending any other information	, enter change(s) here: (Attach	additional sheets, if nec	essary.)	
	N/A				
				<del></del> -	
	<del></del>			<del>-</del>	
				<del></del>	
(The	ective date, if other than the date effective date must be specific, cannot be date this document is filed by the Florida	prior to date of receipt or filed date and	(opti	onal) after	
Da	ted August 07th	2018			
		/s/ Bruna Barbosa			
	•	nature of a member or authorized repre			
	Bruna Barbosa	Authorized Repres	sentative		
		Typed or printed name of	signee		

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Filing Fee: \$25.00

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