

L06600053855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

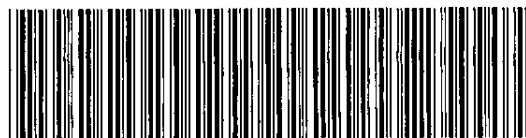
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 NOV 29 PM 8:58

T. HAMPTON

NOV 30 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SAFEGEL 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:

**MANOEL KORT-KAMP**

Name of Person

**SAFEGEL GROUP, LLC.**

Firm/Company

**1800 SW 1 AVE. SUITE 304**

Address

**MIAMI, FLORIDA 33129**

City/State and Zip Code

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

For further information concerning this matter, please call:

**PEDRO J VALENTIN**

Name of Person

at ( 305 )

**305-251-7335**

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



**RECEIVED**

**10 NOV 29 PM 4:00**

**FLORIDA DEPARTMENT OF STATE**  
Division of Corporations

**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

September 28, 2010

MANOEL KORT-KAMP  
1800 SW 1 AVE  
STE 304  
MIAMI, FL 33129

SUBJECT: SAFEGEL GROUP, LLC  
Ref. Number: L06000053855

We have received your document for SAFEGEL GROUP, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II

Letter Number: 810A00023035

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 NOV 29 PM 8:58

**SAFEGEL 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 05/25/2006 and assigned  
Florida document number L06000053855.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N / A

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 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.*

**If Changing Registered Agent, Signature of New Registered Agent**

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	Name	Address	Type of Action
MGR	DECIO ALDRED NETO	1800 SW 1 AVE SUITE 304 MIAMI, FLORIDA 33129	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
* MGR	GEOCHEM INDUSTRIA, C	1800 SW 1 AVE SUITE 304 MIAMI, FLORIDA 33129	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\* GEOCHEM INDUSTRIA, COMERCIO, IMPORTACAO  
E EXPORTACAO LTDA

Dated 09.24.2010

Signature of a member or authorized representative of a member

MANOEL KORT-KAMP

Typed or printed name of signee

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DIVISION OF CORPORATIONS

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