

✓
L08000049566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 OCT -2 AM 9:31

FILED

B. BOSTICK
OCT - 4 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FREITAS INTERNATIONAL 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:

PEDRO FREITAS
Name of Person

FREITAS INTERNATIONAL GROUP LLC
Firm/Company

3050 DYER BLVD SUITE: 406
Address

KISSIMMEE, FLORIDA 34741
City/State and Zip Code

PEDRO FREITAS @ YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO FREITAS at (305) 209-0909
Name of Person Area Code & Daytime Telephone Number

2013 OCT -2 AM 9:31
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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**

FREITAS INTERNATIONAL 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 05/15/2008 and assigned Florida document number 608000049566

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)

2013 OCT -2 AM 9:30
TALLAHASSEE, FLORIDA
3050 DYER BLVD
SUITE 406
KISSIMMEE, FL 34741

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MARCO FREITAS	201 S. BISCAYNE BLVD	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

TALLAHASSEE COUNTY

2013 OCT -2
 9:00
 Add
 Remove

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

Dated 26TH SEPTEMBER, 2013


Signature of a member or authorized representative of a member

PEDRO FREITAS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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CLERK OF CIRCUIT
TALLAHASSEE, FLORIDA