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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 15 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENIS GLOBAL COMMODITIES 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:

Marlene Sanchez

Name of Person

MMS Corporate Services

Firm/Company

1451W CYPRESSCREEKROAD SUITE 300

Address

FORTLAUDERDALE, FL 33309

City/State and Zip Code

ogsasuppliers@gmail.com

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

For further information concerning this matter, please call:

Marlene Sanchez

954 673-3566

Name of Person

at ()
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2016

MARLENE SANCHEZ
MMS CORPORATE SERVICES
1451 W CYPRESS CREEK ROAD SUITE 300
FORT LAUDERDALE, FL 33309

SUBJECT: ENIS GLOBAL COMMODITIES, LLC
Ref. Number: L09000034330

We have received your document for ENIS GLOBAL COMMODITIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

Please return your document, along with 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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 816A00013643

2016 JUL 15 PM 3:38

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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16 JUL 15 PM 4:15
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TALLAHASSEE, FLORIDA

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

ENIS GLOBAL COMMODITIES, 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 04/08/2009 and assigned
Florida document number L09000034330.

This amendment is submitted to amend the following:

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

SIGTUNA GOLD TRADERS NV LLC

The new name must be distinguishable and contain 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGRM	EDWARD ENIS	10100 CORAL CREEK RD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33156	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EDWARD ENIS	10100 CORAL CREEK RD	<input checked="" type="checkbox"/> Add
		CORAL GABLES, FL 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 15 PM 4 15

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)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JULY 12TH 2016

Signature of a member

EDWARD ENIS

E E

Page 3 of 3

Filing Fee: \$25.00

6-11 (ED)
16 JUL 15 PM 4:15
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TALLAHASSEE, FLORIDA