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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : J.E. OYARCE & ASSOCIATES
Account Number : I19990000186
Phone : (305) 324-2248
Fax Number : (305) 324-4959

FILED
10 MAY 27 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NATGOLD NATURAL GOLD, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

D. BRUCE

MAY 28 2010

EXAMINER

RECEIVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

To: Registration Section
Division of Corporation

SUBJECT: NATGOLD NATURAL GOLD, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

JORGE E OYARCE

(Name of person)

JE OYARCE & ASSOCIATES, PA

(Firm/Company)

199 SW 12TH AVENUE, SUITE 11

(Address)

MIAMI, FLORIDA 33130

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JORGE E OYARCE

(Name of Person)

at (305) 305-324-2248

(Area Code & daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32301

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing fee &
Certificate of Status

☐ \$55 Filing fee &
Certified Copy

☐ \$60 Filing Fee
Certificate of Status &
Certified Copy

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
NATGOLD NATURAL GOLD, 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 JUNE 29, 2009

and assigned Florida document number L09000063085

This amendment is submitted to amend the following:

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

SPECIAL ENTREPRENEUR, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter the principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

15031 SW 146th Street

Miami, Florida 33196

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CLERK OF COURT
TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15031 SW 146th Street

Miami, Florida 33196

B. Is 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: _____

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signatura, 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)

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TALLAHASSEE, FLORIDA

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>
MGM	OMM OMNI MEDIA MARKETING, LLC	15031 SW 146th Street Miami, FL 33196	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGM	HECTOR G. CUEVA	15031 SW 146th Street Miami, FL 33196	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGM	HECTOR G. CUEVA JIMENEZ	15031 SW 146th Street Miami, FL 33196	<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)*

Dated MAY 26, 2010

Signature of a Member or authorized representative of a member

OLDEMAR D BARREIRO-VAZQUEZ

Typed or printed name of signee