

9/25/2018

Division of Corporations

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 : MIAMI BUSINESS SOLUTIONS, INC.
Account Number : I20170000045
Phone : (904)375-1652
Fax Number : (800)323-1074

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

Email Address: eduardo_miralles@hotmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SWEET GLADYS LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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SEP 27 2018

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SWEET GLADYS 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:

EDUARDO MIRALLES

Name of Person
MBS INC

Firm/Company
2341 EGREMONT DR

Address
ORANGE PARK, FL 32073

City/State and Zip Code
EDUARDO_MIRALLES@HOTMAIL.COM

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

For further information concerning this matter, please call:

EDUARDO MIRALLES

755
at ()
Area Code

546-4460

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

FILED
18 SEP 26 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SWEET GLADYS 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 02/19/2010 and assigned
Florida document number L10000018964

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 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

City, Florida 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 603, 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>
AMBR	ANGELA GLADYS QUIROZ	10545 NW 29TH TERRACE DORAL, FL 33172	☐ Add
			☐ Remove
			☒ Change
AMBR	SERGIO GUSTAVO GOLDMAN	10545 NW 29TH TERRACE DORAL, FL 33172	☐ Add
			☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Add
			☐ Remove
			☐ Change

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

E. Effective date, if other than date of filing (optional)
 (If an effective date is listed, the date could be specified and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 601.0007 (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.

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

Dated SEPTEMBER 25TH

ANGELA G QUIROZ

JUDITH GALAMAN

SERGIO G GOLPIMAN