

L11000091474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
2016 APR -4 PM 3:35
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
APR -7

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GTS INTERNATIONAL 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:

Brian G. Becker, Esq.

Name of Person

Becker & Associates, P.A.

Firm/Company

5301 N Federal Highway, Suite 260

Address

Boca Raton, FL 33487

City/State and Zip Code

brian@bgbimmigration.com

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

For further information concerning this matter, please call:

Brian G. Becker, Esq.

561 674-0080
at ()

Name of Person

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GTS INTERNATIONAL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2016 APR -6 PM 3:35
CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/09/2011 and assigned
Florida document number L11000091474.

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

_____, 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	SINATORA FILHO, DEODATO F	8220 NW 30TH TERRACE	<input type="checkbox"/> Add
		MIAMI, FL 33122	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	PATRICIA, BARBOSA S	8220 NW 30TH TERRACE	<input type="checkbox"/> Add
		MIAMI, FL 33122	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	DPKS INVESTMENTS LLC	8220 NW 30TH TERRACE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33122	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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APR 16 2014
M 3:35
CLERK OF COURT
CLERK OF COURT
CLERK OF COURT

2016 APR 10
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 04/10/16 BY 60322
UCBAW/STP

FILED
2016 APR -4 PM 3:35
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FBI
ALBUQUERQUE, NM

(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)

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 March 22 2016

[Handwritten signature]

Signature of a member or authorized representative of a member

DEODATO F. SINATORA FILHO.

Typed or printed name of signee