

L11000098260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

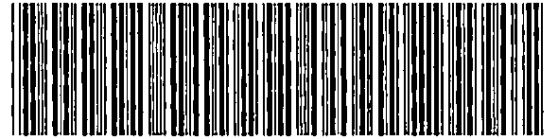
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEWGATE CAPITAL PARTNERS 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:

JOE A. ALVAREZ JR.
Name of Person

NEWGATE CAPITAL PARTNERS LLC.
Firm/Company

2250 LEE RD., SUITE 100
Address

WINTER PARK, FL. 32789
City/State and Zip Code

JALVAREZ@NEWGATECAPITALPARTNERS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LARRY D. MASCHHOFF at (407) 647-8752
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

NEWGATE CAPITAL PARTNERS, 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 AUG. 26, 2011 and assigned Florida document number L11000098260.

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)

2250 LEE RD.

SUITE 100

WINTER PARK, FL. 32789

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2250 LEE RD.

SUITE 100

WINTER PARK, FL. 32789

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:

2250 LEE RD., SUITE 100

Enter Florida street address

WINTER PARK

City

Florida

Zip Code

32789

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>
<u>MGR</u>	<u>JOE A. ALVAREZ JR.</u>	<u>2250 LEE RD.</u>	<input type="checkbox"/> Add
		<u>SUITE 100</u>	<input type="checkbox"/> Remove
		<u>WINTER PARK, FL. 32789</u>	<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>LARRY K. WALKER</u>	<u>2250 LEE RD.</u>	<input type="checkbox"/> Add
		<u>SUITE 100</u>	<input type="checkbox"/> Remove
		<u>WINTER PARK, FL. 32789</u>	<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>BRETT ANDREWS</u>	<u>2250 LEE RD.</u>	<input checked="" type="checkbox"/> Add
		<u>SUITE 100</u>	<input type="checkbox"/> Remove
		<u>WINTER PARK, FL. 32789</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>CHRISTOPHER SHENEFELT</u>	<u>2250 LEE RD.</u>	<input checked="" type="checkbox"/> Add
		<u>SUITE 100</u>	<input type="checkbox"/> Remove
		<u>WINTER PARK, FL. 32789</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>LARRY D. MASCHHOFF</u>	<u>2250 LEE RD.</u>	<input checked="" type="checkbox"/> Add
		<u>SUITE 100</u>	<input type="checkbox"/> Remove
		<u>WINTER PARK, FL. 32789</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>GRIFFIN VALDES</u>	<u>601 NORTH NEW YORK AVE.</u>	<input type="checkbox"/> Add
		<u>SUITE 220</u>	<input checked="" type="checkbox"/> Remove
		<u>WINTER PARK, FL. 32789</u>	<input type="checkbox"/> Change

MGR = Manager
AMBR = Authorized Member

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AMBR = Authorized Member

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(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)

Filing Fee: \$25.00