

L11000112144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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18 JUL 31 PM 5:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C SIMMONS  
AUG 07 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NCFJ INVESTMENTS 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:

NILTON FREGNI

\_\_\_\_\_  
Name of Person

EXPAT CONSULTING CORP

\_\_\_\_\_  
Firm/Company

8615 COMMODITY CIRCLE, SUITE 11

\_\_\_\_\_  
Address

ORLANDO - FL. ZIP.34.747

\_\_\_\_\_  
City/State and Zip Code

ACC@EXPATCONSULTING.COM

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

For further information concerning this matter, please call:

NILTON FREGNI

407 7451112

\_\_\_\_\_  
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

## Page 1 of 3

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18  
RECORDS OF STATE  
PALM BEACH, FLORIDA

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	ENZO SALLES FATUCH	8615 COMMODITY CIRCLE, S1	<input type="checkbox"/> Add
		ORLANDO - FL - 32.819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ETTORE SALLES FATUCH	8615 COMMODITY CIRCLE, S1	<input type="checkbox"/> Add
		ORLANDO - FL.32.819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ENRICO SALLES FATUCH	8615 COMMODITY CIRCLE, S1	<input type="checkbox"/> Add
		ORLANDO - FL. 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

FILE  
JUL 31 18 PM 5:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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JUL 31 PM 5:06  
18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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)

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

Dated 07/27 2018

*Paul L. Turner*  
Signature of a member or authority

Signature of a member or authorized representative of a member

NEI CELSO FATUCH JR

Typed or printed name of signee