# L12000136368

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C. LEWIS

DEC 1 0 2013

EXAMINER

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

CHD IFCT.

## GREEN MARKET GLOBAL 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:

## MARIA L ROGGIERO

Name of Person

# GREEN MARKET GLOBAL LLC

Firm/Company

## 1981 Isla De Palma Cir

Address

Naples FI 34119

City/State and Zip Code

#### lorena@greenmarketglobal.com

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

For further information concerning this matter, please call:

Maria

239,776-1355

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

APPROVED AND FILED

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13 DEC -9 PH 2:53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u> Mreen Ma</u> ( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.)  orida Limited Liability Company)
The Articles of Organization for this Limited Liabil Florida document number <u>L12000136368</u>	lity Company were filed on Oct 25, 2012 and assigned
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e limited liability company here:
The new name must be distinguishable and end with th	e words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	(DDRESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO.)	<u>xy</u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new
Name of New Registered Agent:	MARIA L ROGSIERO 1981 TSG de POLMA SIV
New Registered Office Address:	Enter Florida street address
-	NOPES , Florida 341/6.  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 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

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>	Name	Address	Type of Action
MGR	Armando Velandia	1610 SW 6TH AVE	Add
		Cape Coral,FI 33991	Remove
MGRM	Dino Roggiero	1981 Isla De Palma Cir	
		Naples, FI 34119	Remove
MGRM	Maria C Rubiano	1610 SW 6TH AVE	
		Cape Coral, Fl 33991	Remove
			Remove
			Add
			Remove
			Add
			Remove

APPROVEL AND FILED

						SECRETARY OF STALLAHASSEE, FE		
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Filing Fee: \$25.00