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AUG 157013 D. BUTLER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

:

SGS INTERNATIONAL BUSINESS 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:

DANILO SANTANA

Name of Person

US TAX CONSULTING INC

Firm/Company

5401 S. KIRKMAN RD. STE 105

Address

ORLANDO, FL 32819

City/State and Zip Code

INFO@USTAXCONSULTING.NET

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

For further information concerning this matter, please call:

DANILO SANTANA

at (407) 674-8969

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

SGS INTERNATIONAL BUSINESS LLC

(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now ap mited Liability Compa	pears on our records.)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L13000003483</u>	mpany were filed on	JANUARY 08TH 2013 and assigned	
This amendment is submitted to amend the following:		12	
A. If amending name, enter the new name of the limit	ed liability company	<u>here</u> :	
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Co	ompany," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	5401 S. k	5401 S. KIRKMAN RD. STE 105	
(Principal office address MUST BE A STREET ADDRE	ORLAND	O, FL 32819	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS	SABOVE	
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		on our records, <u>enter the name of the new</u>	
Name of New Registered Agent: US TA	ew Registered Agent: US TAX CONSULTING INC		
New Registered Office Address: 5401 S. KIRKMAN RD. STE 105			
	Enter Florida street address		
ORLA	ANDO	, Florida 32819	
	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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby continue that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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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 **Title Address Type of Action** Name 1 **EDUARDO SAAD** 7025 EDGEWORTH DR. **MGRM** ORLANDO, FL 32827 7025 EDGEWORTH DR. 🗸 Add **EDUARDO SAAD** MBR ORLANDO, FL 32827 Remove 11913 YELLOW FIN TRAIL Add JORGE LUIZ SAAD MBR ORLANDO, FL 32827 Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
By vote and irrevocable determination of members holding majority
of capital interest.
Dated August 09th 2013
Signature of a member or authorized representative of a member
SALIM G. SAAD - MBR / MGR / MGRM PRESIDENT
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

18 AUG 13 PM 4:12

A.