



## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Forpus International 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:

Carla Fernandez

Name of Person

Firm/Company

493 Castle Dr

Address

Naples Florida 34119

City/State and Zip Code

Carla@dfcmedia.com

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

For further information concerning this matter, please call:

Douglas Barbosa

at (239)

206-4526

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

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Forpus International Investments 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 16th of May, 2013 and assigned Florida document number L13000039174.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

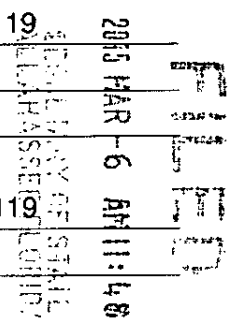
493 Castle Dr Naples Florida 34119

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

493 Castle Dr Naples Florida 34119

**(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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	Carla Fernandez	5007 Fairhaven Lane	<input type="checkbox"/> Add
		Naples Florida 34109	<input checked="" type="checkbox"/> Remove
MGR	Andre A Theodore Bucsan	231 Av Presidente Wilson 29	<input checked="" type="checkbox"/> Add
		Rio de Janeiro RJ Brazil 20030-020	<input type="checkbox"/> Remove
MGR	Carlos Alberto V Neves	42 Rua Marquesa De Santos 1104	<input checked="" type="checkbox"/> Add
		Rio de Janeiro RJ Brazil 22221-080	<input type="checkbox"/> Remove
MGR	Sebastião F Brasil	Rua Capitão Leonideo Soares 209	<input checked="" type="checkbox"/> Add
		Pianalto, Belo Horizonte Brazil 31720-59	<input type="checkbox"/> Remove
MGR	Luiz Antonino M Ribeiro	Rua Teodoro Braga 111 #104	<input checked="" type="checkbox"/> Add
		Rio De Janeiro RJ Brazil 21920-236	<input type="checkbox"/> Remove
MGR	Luiz Felipe D Ribeiro	Rua Teodoro Braga 111 #104	<input checked="" type="checkbox"/> Add
		Rio De Janeiro RJ Brazil 21920-236	<input type="checkbox"/> Remove

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 COUNTY OF ST. JOHNS  
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See Attachment

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGR	Luiz A De Castro Santos	Rua Alberto De Gois 1533/4A	<input checked="" type="checkbox"/> Add
		Campo Belo São Paulo Brazil 04610-004	<input type="checkbox"/> Remove
MGR	Sergio R Guerra Rei	50 Rua Afonso Pena CB2	<input checked="" type="checkbox"/> Add
		Rio De Janeiro RJ Brazil 20270-243	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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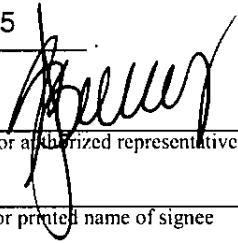
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 3rd of March, 2015



Signature of a member or authorized representative of a member

Carla Fernandez

Typed or printed name of signee

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Filing Fee: \$25.00

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