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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: SMART TAX

Account Number : 120090000034

: (954)782-3610

Fax Number

: (954)366-3239

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: eduardo @nascimento. US

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GROUP 21 INTERNATIONAL INVESTMENTS, LLC.

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K. SALY EXAMINER

MAY 1 0 2013

COVER LETTER

TO: Registration Section
Division of Corporations

GROUP 21 INTERNATIONAL INVESTMENTS, LLC.

Subject: _

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following:

EDUARDO NASCIMENTO

Name of Person

GROUP 21 INTL INVESTMENTS, LLC.

Fim/Company

3921 SW 47TH AVE STE 1015

Address

DAVIE, FL 33314

City/State and Zip Code

EDUARDO@NASCIMENTO.US

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

For further information concerning this matter, please call:

CLEBER

954 782.3610

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

Certificate of Status

D\$55.00 Filing Fee &
Cartified Copy
(additional copy is enclosed)

□S60.00 Filing Fec.
Cortificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURTER ADDRESS:

Registration Section
Division of Corporations
Cliffon Building
2661 Executive Center Circle
Tullahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 13 MAY -9 AM 10: 13

SECRETARY OF STATE TALLAHASSEE, FLORIDA

GROUP 21 INTERNATI					
(Name of the Limited (A	Liability Compar Florida Limited L	iy as it now appears or ability Company)	n our records.)		
The Articles of Organization for this Limited Li Florida document number <u>L13000046887</u>	ability Company	were filed on 03/29	9/2013 and assigned		
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liab	ility company bere:			
The new name must be distinguishable and end wit "L.L.C."	h the words Limi	ted Liability Company,	"the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3921 SW 47TH AVE STE 1015 DAVIE, FL 33314			
					3921 SW 47TH AVE STE 1015 DAVIE, FL 33314
		B. If amending the registered agent and/ registered agent and/or the new registered or			records, enter the name of the new
Name of New Registered Agent:	EDUARD	O NASCIMENT	О		
New Registered Office Address: 3921 St		V 47TH AVE STE 1015			
		Enter	Florida street address		
	DAVIE		Florida 33314 Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:	City	Zip Code		
I hereby accept the appointment as registere the provisions of all statutes relative to the p accept the obligations of my position as regi being filed to merely reflect a change in the company has heen notified in writing of this	roper and comp stered agent as registered office	vlete performance of provided for in Chap	my duties, and I am familiar with and oter 608, F.S. Or, if this document is		

If Changing Registered Agent, Simulture 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>	<u>Name</u>	Address	Type of Action
MGRM	PEREIRA, ZENITA INACIA	2211 NW 15TH AVE STE 12	Add
		POMPANO BEACH, FL 33069	Remove
MGRM	PEREIRA, MARIA G	2211 NW 15TH AVE STE 12	Add
		POMPANO BEACH, FL 33069	Remove
MGRM	NASCIMENTO, EDUARDO	3921 SW 47TH AVE STE 1015	Add
		DAVIE, FL 33314	Remove
MGRM	SAADI, LUIS WAGNER	3921 SW 47TH AVE STE 1015	
		DAVIE, FL 33314	Remove
			Add
			Remove
			_
			Add
			Remove

lf amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necess	ary.)
May, 8th	2013	
ed tray;		
. Sig	mature of a member or authorized representative of a member	 -
EDUARDO NAS		
	Timed or swinted name of signal	

Page 3 of 3

Filing Fee: \$25.00