

L13000 133360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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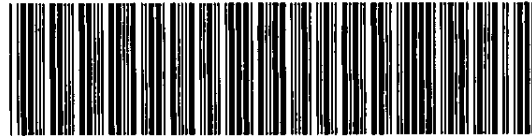
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: OGC 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:

Odijas G Caminha

Name of Person

OGC Associates PA

Firm/Company

244 S. Military Trail

Address

Deerfield Beach, FL 33442

City/State and Zip Code

ogc@ogcfinancial.com

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

For further information concerning this matter, please call:

Odijas G Caminha

Name of Person

at **954 708-2817**

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

7012 3460 0001 4113 8108

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

OGC 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 09/20/2013 and assigned
Florida document number L13000133360.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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 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

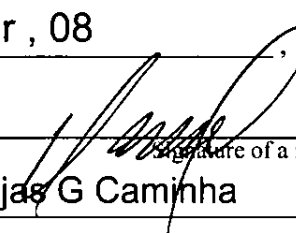
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jose Antonio De Luca	Alameda Percilio Bortolozo 84	<input checked="" type="checkbox"/> Add
		Valinhos SP 13278400	<input type="checkbox"/> Remove
		Brazil	
MGRM	Paulo Silva	208 S. Military Trail	<input type="checkbox"/> Add
		Deerfield Beach, FL 33442	<input checked="" type="checkbox"/> Remove
		USA	
			<input type="checkbox"/> Add
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STANDARD OF CARE
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October , 08 , 2013


Signature of a member or authorized representative of a member
Odijas G Caminha / Jose Antonio De Luca
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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