#15000009181

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K.SALY EXAMINER JUN - 2 2015

COVER LETTER

Division of Co	orporations		
GIMA US	SA, LLC		
	Name of Limi	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Giorgio Prestipino		
		Name of Person	
		Firm/Company	
	244 Biscayne Blvd. Apt. 36	502	
	-1 '	Address	
	Miami, FL 33132		
		City/State and Zip Code	
	giorgio2110@gmail.com		
	E-mail address: (1	o be used for future annual report notif	ication)
For further information	concerning this matter, please ca	dl:	
Giorgio Prestipino		305 213.2640 at ()	
Name	ot 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:

TO:

Registration Section

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

FILED
2015 MAY 29 AM 9: 54
PALLAHASSEE FLORID:

GIMA USA, 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 I Florida document number L15000009181		ed on 1/15/2015 and	assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability com	<u>прапу here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Compa	any." the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if appli	cable:		<u></u>
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	or registered office add	dress on our records, <u>enter the nan</u>	ne of the new
Name of New Registered Agent:	Giorgio Prestipino		
New Registered Office Address:	244 Biscayne Blvd. Apt.	. 3602	
	 	Enter Florida street address	· · ·
	Miami	, Florida ³³¹³²	
	City:	Zıp Co	ode

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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Giuseppe Fallica	20225 NE 34 CT # 516	□ Add
		Aventura, FL 33180	■ Remove
			☐ Change
MGR	Marco Gradari	244 Biscayne Blvd. Apt. 3602	Add
		Miami, FL 33132	■ Remove
		_	Change
-			☐ Add
*			□ Remove
			2 Ginge Halve 9.
			Change
			□ Remove
			Change
			□ Remove

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	T.
. Effec	tive date, if other than the date of filing: (optional)
(It an e	frective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docu	ment's effective date on the Department of State's records.
f the re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
וז (ס	e 90th day after the record is filed.
Date	, 5/21/2015
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Dale	

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Filing Fee: \$25.00