

L180000 35511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

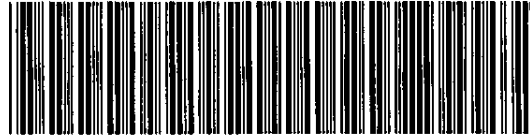
(Business Entity Name)

(Document Number)

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05/11/15--01016--018 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY 11 PM 3:09

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTERNATIONAL GROUP ENTERPRISE 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:

PAULO A GARCIA

Name of Person

INTERNATIONAL GROUP ENTERPRISE LLC

Firm/Company

22415 SW 61ST WAY APT 103

Address

BOCA RATON , FL 33428

City/State and Zip Code

YOURTAX@THESMARTTAX.COM

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

For further information concerning this matter, please call:

FERNANDA LOLA

954 782 3619
at ()

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**

INTERNATIONAL GROUP ENTERPRISE 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 03/04/2015 and assigned
Florida document number L15000039511.

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 contain 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)

730 NE 8TH CT

POMPANO BEACH, FL 33060

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

730 NE 8TH CT

POMPANO BEACH, FL 33060

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:

MARCELO R ANDRADE

New Registered Office Address:

730 NE 8TH CT

Enter Florida street address

POMPANO BEACH

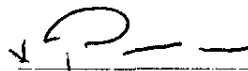
City

Florida 33060

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	PAULO A GARCIA	22415 SW 61ST WAY APT 103	<input type="checkbox"/> Add
		BOCA RATON, FL 33428	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Marlus A Santos	730 NE 8th CT	<input type="checkbox"/> Add
		Pompano Beach-FL-33060	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Sergio Luiz Ribeiro	730 NE 8th CT	<input type="checkbox"/> Add
		Pompano Beach-FL-33060	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Marcelo R Andrade	730 NE 8th CT	<input type="checkbox"/> Add
		Pompano Beach-FL-33060	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

1

(If an effective 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 604.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated MAY 06 2015

Signature of a member or authorized representative of a member

PAULO A GARCIA

Typed or printed name of signer

11 MAY 11 PM 3:00