

L150000 47692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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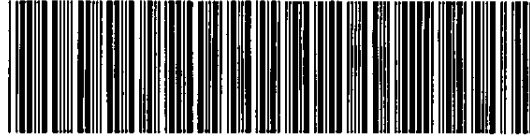
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 22 2015
J SHIVERS

707



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2015

CARLOS FUENTES
7950 NW 53RD ST SUITE 337
MIAMI, FL 33166

SUBJECT: CEOTEC, LLC
Ref. Number: L15000043692

We have received your document for CEOTEC, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 915A00019445

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CEOTEC, LLC

DOCUMENT NUMBER: L15000043692

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS MANUEL RIVERO FUENTES

Name of Contact Person

CEOTEC, LLC

Firm/ Company

7950 NW 53RD STREET, SUITE 337

Address

MIAMI, FL 33166

City/ State and Zip Code

manuel926@yahoo.com

/

mgenovesel@hotmail.com

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

For further information concerning this matter, please call:

CARLOS MANUEL RIVERO FUENTES at (305) 615.3888
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

NOTE: THE FOLLOWING DOCUMENTS ARE ATTACHED:

- 1) AMENDED OPERATING AGREEMENT
- 2) ASSIGNMENT OF MEMBERSHIP INTEREST
- 3) MEMBER'S RESOLUTION

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

CEOTEC, 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 MARCH 10, 2015 and assigned
Florida document number L15000043692

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

Florida

City

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.

N/A

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>
AMGR	SISTEMAS ELECTRONICOS ONLINE 2010.COM, CA	COLINAS DE BELLO MONTE C/SUAPURE C/MOLOZORA-A1 CARACAS, VENEZUELA	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: SEPTEMBER 29, 2015 (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated SEPTEMBER 29th, 2015


Signature of a member or authorized representative of a member

CARLOS MANUEL RIVERO FUENTES

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA