

216000000 1406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

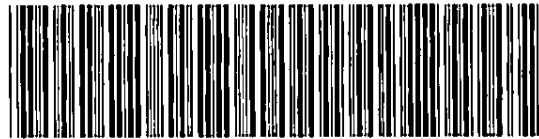
(Document Number)

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FILED  
2020 FEB 12 AM 8:11  
RECEIVED  
FBI ALBANY, NY

Amend

MAR 07 2020  
ALBRITTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CLUBE SAUDE GROUP, 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:

LEANDRO BERETTA

\_\_\_\_\_  
Name of Person

SBGE USA TAX ACCOUNTING & FINANCIAL

\_\_\_\_\_  
Firm/Company

10 FAIRWAY DR, SUITE 300

\_\_\_\_\_  
Address

DEERFIELD BEACH, FL 33441

\_\_\_\_\_  
City/State and Zip Code

OFFICE@SBGEUSA.COM

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

For further information concerning this matter, please call:

LEANDRO BERETTA

772 332-6833

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

CLUBE SAUDE GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2020 FEB 12 AM 8:11  
SEAL OF THE STATE OF FLORIDA  
CLERK OF THE CIRCUIT COURT

The Articles of Organization for this Limited Liability Company were filed on 12/21/2015 and assigned  
Florida document number L16000001406.

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 "LLC."

**Enter new principal offices address, if applicable:**

3250 NW 23RD AVE 100

**(Principal office address MUST BE A STREET ADDRESS)**

POMPANO BEACH, FL 33069

**Enter new mailing address, if applicable:**

3250 NW 23RD AVE 100

**(Mailing address MAY BE A POST OFFICE BOX)**

POMPANO BEACH, FL 33069

**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:

SBGE USA TAX ACCOUNTING & FINANCIAL

New Registered Office Address:

10 FAIRWAY DR. SUITE 300

Enter Florida street address

DEERFIELD BEACH

Florida 33441

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 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.*

*[Signature]*  
**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	Leandro Anderson Francisco	RUA NICOLA RIVELLI, 89	<input type="checkbox"/> Add
		VILA BELLA JUNDIAI SP 13209- OC	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Marlene S Tarallo	RUA NICOLA RIVELLI, 89	<input type="checkbox"/> Add
		VILLA BELLA, JUNDIAI SP - 13209-OC UN	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Schommer Investments LLC	3250 NW 23RD AVE 100	<input checked="" type="checkbox"/> Add
		POMPANO BEACH, FL 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	UP Way Investments LLC	3250 NW 23RD AVE 100	<input checked="" type="checkbox"/> Add
		POMPANO BEACH, FL 33069	<input type="checkbox"/> Remove
			<input 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

[illegible]

**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.

Dated 02/07, 2010.

Mwlene Schumner Tarallo  
Typed or printed name of signer

**Filing Fee: \$25.00**