

L16000110999

To: DIVISION OF CORPORATIONS

Page 1 of 4

2016-06-28 13:24:56 (GMT)

18887728108 From: Mike Natarus

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000156589 3)))



H160001565893ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6323

From:

Account Name : TAXLEAF.COM INC
Account Number : I20140000084
Phone : (305) 541-3980
Fax Number : (305) 541-7033

2016 JUN 28 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

TMI GLOBAL ENTERPRISES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUN 28 PM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUN 28 PM 11:33

S Warren

JUN 29 2016

H16000156589 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TMI GLOBAL ENTERPRISES 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 06/08/2016 and assigned
Florida document number L16000110999

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

City _____, Florida _____
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

Page 1 of 3

H16000156589 3

FILED
JUN 28 P 12:04
CLERK OF STATE
TALLAHASSEE, FLORIDA

H16000156589 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
--------------	-------------	----------------	-----------------------

MMGR

Name

Address

Type of Action

JCG CALIFORNIA AND FLORIDA INVESTMENTS LLC

3111 N UNIVERSITY DR STE 105

☐ Add

CORAL SPRINGS, FL 33065

 Remove

☐ Add☐ Remove☐ Add☐ Remove☐ Add

 Remove

☐ Add☐ Remove☐ Add☐ Remove

Page 2 of 3

H16000156589 3

☐ Add
☒ Remove
 11/28 P 12:04
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

7-11-68

H16000156589 3

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JUNE 27th, 2016


Signature of a member or authorized representative of a member
JOAO C GONDIM

Typed or printed name of signer

Page 3 of 3

2016 JUN 28 P 12:04
SECRETARY OF STATE
611 MONROE, FLORIDA

FILED

H16000156589 3