

11/14/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : GFS TAX & ACCOUNTING SERVICES
 Account Number : I20140000089
 Phone : (754)301-2128
 Fax Number : (954)252-4650

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

Email Address: INFO@GFSTAXACCT.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CEOM INVESTMENTS LLC

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Corporate Filing Menu

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H190003353293

COVER LETTER**TO:** Registration Section
Division of Corporations**SUBJECT:** CEOM INVESTMENTS 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:

GILVAM F DOS SANTOS

Name of Person

GFS TAX & ACCOUNTING SERVICES

Firm/Company

2001 W CYPRESS CREEK RD STE 102 B

Address

FT LAUDERDALE FL 33309

City/State and Zip Code

INFO@GFSTAXACCT.COM

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

For further information concerning this matter, please call:

GILVAM F DOS SANTOS

at (954) 9573244

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☐ \$35.00 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

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FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2019 NOV 14 P 3:46

BELLAROSA, FLORIDA

CEOM INVESTMENTS 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 07/06/2016 and assigned
Florida document number LI6000128288

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)

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:

GFS TAX & ACCOUNTING SERVICES

New Registered Office Address:

2001 W CYPRESS CREEK RD STE 102 B

Enter Florida street address

FT LAUDERDALE

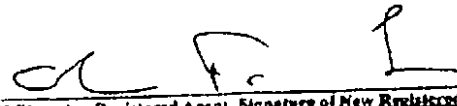
City

Florida 33309

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

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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	GOMES DE OLIVEIRA, ALDAIR	Rua Raquel de Queiroz 90 L14 Q4 Rio de Janeiro RJ 22793-100 BR	☐ Add
			☒ Remove
			☐ Change
AMBR	DE MELO FERREIRA, MARCIA	Rua Raquel de Queiroz 90 L14 Q4 Rio de Janeiro RJ 22793-100 BR	☐ Add
			☒ Remove
			☐ Change
AMBR	MARCIA GOMES DE OLIVEIRA MELO	Rua Raquel de Queiroz 90 L14 Q4 Rio de Janeiro RJ 22793-100 BR	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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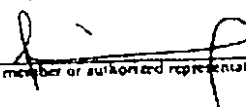
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: _____ (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 NOVEMBER 12 2019



Signature of a member or authorized representative of a member

GOMES DE OLIVEIRA, ALDAIR

Typed or printed name of signer