

1/7/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H19000006636 3)))



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To:

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

From:

Account Name : GULATI LAW  
Account Number : I20130000014  
Phone : (407)900-5054  
Fax Number : (407)517-4931

**\*\*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  
ZECA & BINHA US LLC

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EXAMINER

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# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ZECA & BINHA US 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:

Saran Gulati

Name of Person

Gulati Law, P.L.

Firm/Company

479 Montgomery Place

Address

Altamonte Springs, FL 32714

City/State and Zip Code

Office@gulatilaw.com

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

For further information concerning this matter, please call:

Saran Gulati

407

900-505-4

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

FILED  
2019 JAN 14 AM 9:28

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZECA &amp; BINIA US 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 11/30/2016 and assigned  
Florida document number L16000217370

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:

7817 Summerlake Groves Street

(Principal office address MUST BE A STREET ADDRESS)

Winter Garden, FL 34787

Enter new mailing address, if applicable:

7817 Summerlake Groves Street

(Mailing address MAY BE A POST OFFICE BOX)

Winter Garden, FL 34787

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

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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>
MGR	Talita Guimaraes Sales Ribeiro	7817 Summerlake Groves Street Winter Garden, FL 34787	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Larissa Guimaraes Sales-Sanchez	7817 Summerlake Groves Street Winter Garden, FL 34787	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ezequias Vieira Sales		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		7817 Summerlake Groves Street Winter Garden, FL 34787	<input checked="" type="checkbox"/> Change
MGR	Gabia G Sales		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		7817 Summerlake Groves Street Winter Garden, FL 34787	<input checked="" type="checkbox"/> Change
AMBR	Melissa C Sales		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		7817 Summerlake Groves Street Winter Garden, FL 34787	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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)  
(If an effective date is listed, the date must be specific.)

(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 statute, the filing is void.

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

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

Dated \_\_\_\_\_

Adeline L.

Melissa c sales

Typed or printed name of signee

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Filing Fee: \$25.00

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