

Division of Corporations

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Florida Department of State
Division of Corporations
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AFM AMERICA LLC

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AFM AMERICA LLC

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ETC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AFM AMERICA 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:

GONSALVES, FABIANO

Name of Person

Firm/Company

8211 ROYAL SAND CIRCLE, #209

Address

TAMPA, FL 33615

City/State and Zip Code

fabianogonsalves1@hotmail.com

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

For further information concerning this matter, please call:

GONSALVES, FABIANO

813 679-7756
at ()
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

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

AFM AMERICA 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 01/19/2017 and assigned
Florida document number L17000015772.

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:

GONSALVES, FABIANO

New Registered Office Address:

3211 ROYAL SAND CIRCLE., #209

Enter Florida street address

TAMPA

Florida 33615

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.

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>
MGR	MOREIRA MARTINS, ARTHUR	9510 SUNBELT ST APT 208	<input type="checkbox"/> Add
		TAMPA FL 33635	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GONSALVES, FABIANO	8211 ROYAL SAND CIR	<input type="checkbox"/> Add
		APT 209	<input type="checkbox"/> Remove
		TAMPA FL 33615	<input checked="" type="checkbox"/> Change
MGR	MARTINS MOREIRA, MELISSA	8211 ROYAL SAND CIR	<input type="checkbox"/> Add
		APT 209	<input type="checkbox"/> Remove
		TAMPA FL 33615	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

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.

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

Dated NOVEMBER 27, 2017

Signature of a member or authorized representative of a member

GONSALVES, FABIANO

Typed or printed name of scribe

SPECIAL MEETING MINUTES – LLC

OF:

AFM AMERICA LLC

The special meeting of this limited liability company was held on November 27, 2017 at 1:00pm at the location of 8211 Royal Sand Circle, #209, Tampa FL 33615

The following members and/or managers were present at this annual meeting:

ARTHUR MOREIRA MARTINS

FABIANO GONSALVES

MELISSA MOREIRA MARTINS

1. FABIANO GONSALVES was elected as the chairperson of the meeting.
2. MELISSA MOREIRA MARTINS was elected as secretary of the meeting, and was the person memorializing these minutes.
3. The chairperson announced that the meeting was called by ARTHUR MOREIRA MARTINS of the limited liability company and determined that a quorum was present.
4. The minutes from the previous meeting were distributed. All members that were present read the previous meeting's minutes and inspected any LLC records if they wanted to.
5. The following items of the business were conducted:

<u>MEMBER(S) NAME</u>	<u>% OWNERSHIP CHANGE</u>
FABIANO GONSALVES	50 %
MELISSA MOREIRA MARTINS	50 %

REMOVAL OF MEMBER(S)

ARTHUR MOREIRA MARTINS

There being no further business to discuss, upon motion by FABIANO GONSALVES and carried, the meeting was adjourned.

Dated November 27, 2017

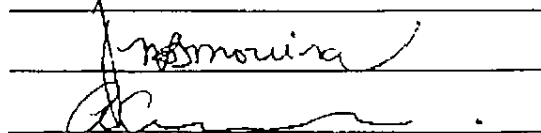
Member name:

FABIANO GONSALVES

MELISSA MOREIRA MARTINS

ARTHUR MOREIRA MARTINS

Member signature:



Signature of Secretary of this meeting that documented this form:


MELISSA MOREIRA MARTINS

November 27, 2017