L170000 27647

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2017 JUN -5 PH 2: 30
SECRETARY OF STATE
TANASSEE FI DRIDA

J. HARRIS

COVER LETTER

TO: Re	gistration Sec vision of Corp	tion porations					
CLID ID CO	GUIMGR L						
Name of Limited Liability Company							
The enclosed	d Articles of A	amendment and fee(s) are sub	mitted for filing.				
Please return	n all correspon	dence concerning this matter	to the following:				
		MICHELLY PASSOS					
			Name of Person				
		CAMPANA GROUPS IN	c				
		-	Firm/Company				
		1761 W. HILLSBORO BI	LVD SUITE 324				
			Address				
DEERFIELD BEACH, FLORIDA 33442							
City/State and Zip Code							
		MICHELLY@CAMPANA	GROUPS.COM to be used for future annual report notific	eation)			
For further i	nformation co	neerning this matter, please ca	-				
MICHELLY	Y PASSOS		954 228-0706				
Name of Person at () Name of Person Area Code Daytime Telephone Number			l'elephone Number				
Enclosed is	a check for the	e following amount:					
\$25.001	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

GUIMGR LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 02/03/2017	and assigned
Florida document number L17000027647		
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		2017 ALL
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		m _© •
Muling dudiess MATT BEAT OF OTFICE DONY		
		مر زرد م
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the same of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	City , F1011	Zin 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>	Type of Action
AMBR	TATIANA F. GARCIA ROZA	DUBAI SILICON OASIS	
		SEMMER VILLAS	■ Remove
		VILLA C89 - DUBAI. UA	□ Change
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			Acs Rhange
			HOWE IN A SSE
			Ren No.
			ORID Se Change
			□ Add
			Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)	essary.)
E. Effective date, if other than the date of filing:	onal) filing.) Pursuant to 605.0207 (3 \(\)b) s date will not be listed as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a (b) The 90th day after the record is filed.	a.m. on the earlier of:
Dated 5/31/7	2017 JUN -5
Signature of a hember or authorized representative of a member GUILHERME M. GARCIA ROZA	YOF S
Typed or printed name of signee	30 S

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Filing Fee: \$25.00