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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.

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To:

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

From:

Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
Phone : (407)932-0040
Fax Number : (407)520-5473

****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
GREEN WORLD INTERNATIONAL LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2017 DEC 26 PM 15:11:12

DIVISION OF CORPORATIONS

17 DEC 26 AM 7:28
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FLORIDA

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Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREEN WORLD INTERNATIONAL 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:

CLAUDIA TEJADA

Name of Person

GREEN WORLD INTERNATIONAL LLC

Firm/Company

3227 CURVING OAKS WAY

Address

ORLANDO, FL 32820

City/State and Zip Code

CLAUDIALUTE@YAHHO.COM

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

For further information concerning this matter, please call:

CLAUDIA TEJADA

407 4532327
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

Page 1 of 3

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	TEJADA, CLAUDIA	EDIF. GERMANIA TORRE 3 AP1	<input type="checkbox"/> Add
		BUCARAMANGO, SA 68000-3	<input checked="" type="checkbox"/> Remove
		CO	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

17 DEC 26 AM 7:28
STATE DEPT OF PA
ALL AMSSS E FORDA

17 DEC 26 AM 7:28
SECRETARY OF STATE
WASHINGTON, D.C.

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

2017

Signature of a member or authorized representative of a member

Typed or printed name of signer.