

L17000142348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

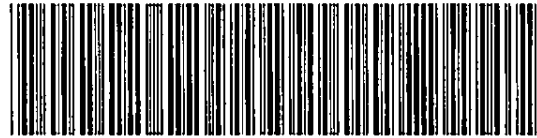
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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10/02/17--01027--015 **25.00

FILED
17 OCT 16 PM 3:38
DIVISION OF

O. SIMMONS

OCT 17 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2017

NATHALIA GONCALVES
1 FLORIDA DR
KEY LARGO, FL 33037

SUBJECT: GMANCHEF LLC
Ref. Number: L17000142348

We have received your document for GMANCHEF LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There can be only one registered agent listed on a company.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II

Letter Number: 917A00019979

▲ Mistake on our behalf. WE ARE NOT trying
to change/add registered agent.
Refer to page 4 (last page) for more details
Thank you.

2017 OCT 15 PM 12:20

NATHALIA GONCALVES

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G MANCHEF, 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:

Nathalia Goncalves
Name of Person

G MANCHEF, LLC
Firm/Company

1 Florida Drive
Address

KEY LARGO FL 33037
City/State and Zip Code

Nathalia@gmanchef.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nathalia Goncalves at (786) 419-7576
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)

ALREADY

PAD.

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**

GMANCHEE 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 07/01/2017 and assigned Florida document number L17000142348.

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 "L.L.C." or the abbreviation "LLC."

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:

New Registered Office Address:

Enter Florida street address

Florida

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>
DIR	NATHALIA GILEK	1 FLORIDA DRIVE	<input type="checkbox"/> Add
		KEY LARGO FL 33037	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nathalia Nunes Gilek Goncalves	1 FLORIDA DRIVE	<input checked="" type="checkbox"/> Add
		KEY LARGO FL 33037	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
DIR	GONZALO GARCIA	1 FLORIDA DRIVE	<input type="checkbox"/> Add
		KEY LARGO FL 33037	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gonzalo Rafael Garcia Donis	1 FLORIDA DRIVE	<input checked="" type="checkbox"/> Add
		KEY LARGO FL 33037	<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

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

As per our Bank's Request, in order
to open a bank account our names (owners)
must be exactly as stated on our
DRIVER'S license & title must be MANAGERS
not Directors.

Thanks.

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CLERK

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 OCT 10, 2017.



Signature of a member or authorized representative of a member

Nathalia G. Gencalves

Typed or printed name of signer