

L17000151586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

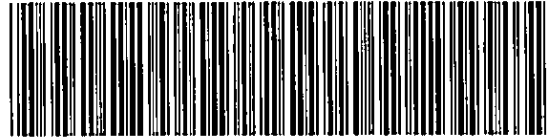
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

wrong form

Office Use Only



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FILED
18 JUN 21 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O SIMMONS
JUN 25 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 7, 2018

HANNA WEREDE
4687 KARSTEN CREEK DR
ORANGE PARK, FL 32065

SUBJECT: GATE IMPORT AND EXPORT AGENCY LLC
Ref. Number: L17000151586

We have received your document for GATE IMPORT AND EXPORT AGENCY LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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

Octavia L Simmons
Regulatory Specialist III

Letter Number: 318A00011884

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GATE IMPORT AND EXPORT AGENCY LLC

Name of Corporation

DOCUMENT NUMBER: L17000151586

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hanna Werede

Name of Contact Person

Firm/Company

4687 Karsten Creek Dr.

Address

Orange Park FL 32065

City/State and Zip Code

hani2115@icloud.com

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

For further information concerning this matter, please call:

Hanna Werede

660

909-90007

Name of Contact Person

at ()

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$35.00 Filing Fee

☒

\$43.75 Filing Fee &
Certificate of Status

☐

\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐

\$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Gate Import and Export Agency 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 July 14, 2017 and assigned Florida document number L17000151586.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Gate Import and Export Trading LLC

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)

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TALLAHASSEE, FLORIDA

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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)

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 June 18, 2018.

Signature of a member or authorized representative of a member

Hanna Werede
Typed or printed name of signee