

L17000219881

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

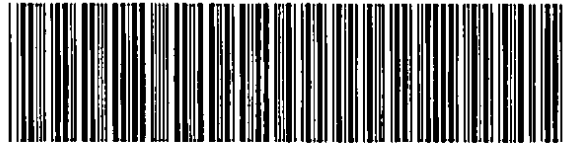
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700306538887

12/19/17--01001--0000 **25.00

TALLAHASSEE, FLORIDA

2017 DEC 18 AM 10:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 DEC 19 AM 11:45

FILED

B FIGUEROA

DEC 19 2017

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

NAVECELL USA 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 10/24/2017 and assigned
Florida document number L17000219881.

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:

3901 SW 109TH AVE APT G2

(Principal office address MUST BE A STREET ADDRESS)

MIAMI FL 33165

Enter new mailing address, if applicable:

3901 SW 109TH AVE APT G2

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI FL 33165

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>
MGR	LISIK DA SILVA, UILSON		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		3901 SW 109TH AVE APT G2	<input checked="" type="checkbox"/> Change
MGR	FERREIRA DE OLIVEIRA, ROSA		<input type="checkbox"/> Add
			<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
DEC 19 AM 11:05
SECRET
FBI - TAMPA
TAMPA, FLORIDA

[illegible]

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.

Dated NOVEMBER 21, 2017

Gilbert Keith da Silva
Signature of a member or authorized representative of a member

WILSON LISIK DA SILVA

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 DEC 19 AM 11:45