

180000 35994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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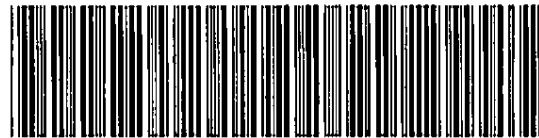
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
18 MAY 23 PM 12:59

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MAY 24 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GOLD 7 PROPERTIES 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:

JOSE LAUREANO FILHO

Name of Person

GOLD 7 PROPERTIES LLC

Firm/Company

8822 W FLAGLER ST, #9

Address

MIAMI, FL 33174

City/State and Zip Code

jp_mia4u@icloud.com

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

For further information concerning this matter, please call:

JOSE LAUREANO FILHO

305 7134706
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

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

GOLD 7 PROPERTIES 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 2/8/2018 and assigned Florida document number 1.18000035994.

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:

(Principal office address MUST BE A STREET ADDRESS)

8822 W FLAGLER ST. #9

MIAMI, FL 33174

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

822 W FLAGLER ST. #9

MIAMI, FL 33174

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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:

JOSE LAUREANO FILHO

New Registered Office Address:

822 W FLAGLER ST. #9.

Enter Florida street address

MIAMI

City

Florida 33174

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>
AMBR	JOSE LAUREANO FILHO	822 W FLAGLER ST. #9	<input checked="" type="checkbox"/> Add
		MIAMI, FL. 33174	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ARNALDO R. DE SOUZA JR.	TOYAMA-KEN TOYAMA-SHI	<input type="checkbox"/> Add
		KOSUGI 25-2 MORE STAGE	<input checked="" type="checkbox"/> Remove
		VII A - 101 JAPAN	<input type="checkbox"/> Change
AMBR	BRUNO GREGHI	R. SILVA JARDIM, 133 AP 41	<input checked="" type="checkbox"/> Add
		JD. BELENZINHO	<input type="checkbox"/> Remove
		SAO PAULO/SP/BRAZIL	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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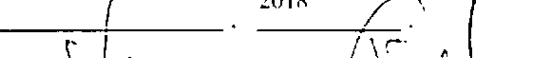
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

Dated MAY 18 2018

AY 18 _____ 2018 _____



Signature of a member or authorized representative of a member

JOSÉ LAUREANO FILHO

Typed or printed name of signee