

L18000118854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

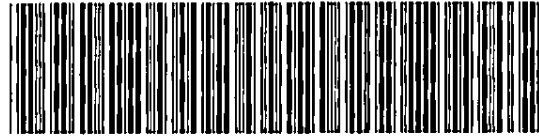
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 DEC 18 AM 3:28

FILED

*Amend
check*

BL VORISEK

DEC 21 2018

685
672

NO

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LGO CONSULTANCY AND ADVISORY 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:

FILIPPE DE SOUSA LEITE

Name of Person

Firm/Company

AVENIDA GETÚLIO VARGAS, 539, BAIRRO CENTRO, 1º ANDAR

Address

ITAÚNA, MINAS GERAIS, 35680-037, BRAZIL

City/State and Zip Code

fillipe@lgoadv.com.br

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

For further information concerning this matter, please call:

FILIPPE DE SOUSA LEITE

+55 37 32421985
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

2018 OCT -5 AM 10:27



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 22, 2018

AVENIDA GETULIO VARGAS ATTN: FELIPE DE SOUSA LEITE
539, BAIRRO CENTRO, 1 ANDAR
ITAUNA, MINAS GERAIS 35680-037
BRAZIL,

SUBJECT: LGO CONSULTANCY AND ADVISORY LLC
Ref. Number: L18000118854

We have received your document for LGO CONSULTANCY AND ADVISORY LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (805) 245-6000.

Brenda L Vorisek
Director

Letter Number: 418A00021657

A handwritten signature, likely of Brenda L. Vorisek, consisting of several overlapping loops and a long, sweeping tail.

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

LGO CONSULTANCY AND ADVISORY 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 MAY 11, 2018 and assigned

Florida document number L18000118854

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 "LLC."

Enter new principal offices address, if applicable:

7310 WEST MCNAB ROAD, SUITE 209, TAMARAC

(Principal office address MUST BE A STREET ADDRESS)

FLORIDA - 33321

Enter new mailing address, if applicable:

7154 NORTH UNIVERSITY DRIVE, SUITE 283,

(Mailing address MAY BE A POST OFFICE BOX)

TAMARAC, FLORIDA - 33321

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

City, Florida

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 | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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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.

2018

FILLIPE DE SOUSA LETTE

Typed or printed name of signee