

218000136973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

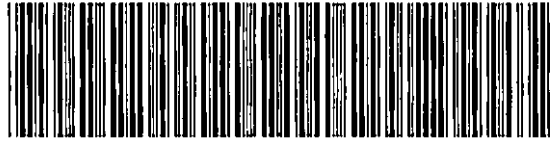
(Business Entity Name)

(Document Number)

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18 JUL -5 AM 8:59

一、總論

二、緒言

三、本國之經濟狀況

四、外國之經濟狀況

五、國際貿易之趨勢

六、結論

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R. WHITE  
JUL 06 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** EUROPEA 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 LAPIDOTE

\_\_\_\_\_  
Name of Person

EUROPEA LLC

\_\_\_\_\_  
Firm/Company

2044 ROCKY HILL DR

\_\_\_\_\_  
Address

DELTONA, FL 32738

\_\_\_\_\_  
City/State and Zip Code

GNUNEZ@PLUSMOREUSA.COM

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

For further information concerning this matter, please call:

JOSE LAPIDOTE

407

739-2038

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 21, 2018

JOE LAPIDOTE  
2044 ROCKY HILL DR  
DELTONA, FL 32738

SUBJECT: EUROPEA LLC  
Ref. Number: L18000136973

We have received your document for EUROPEA 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):

Page 3(of 3) is missing. Please find enclosed, the missing page, and complete the required sections.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 618A00012936

RECEIVED  
18 JUL -5 PM12:05  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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

18 JUL -5 AM 8:59

EUROPEA 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 06/01/2018 and assigned  
Florida document number L18000136973.

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:**

2044 ROCKY HILL DR

**(Principal office address MUST BE A STREET ADDRESS)**

DELTONA, FL 32738

**Enter new mailing address, if applicable:**

2044 ROCKY HILL DR

**(Mailing address MAY BE A POST OFFICE BOX)**

DELTONA, FL 32738

**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 M LAPIDOTE

New Registered Office Address:

2044 ROCKY HILL DR

*Enter Florida street address*

DELTONA

*City*

, Florida 32738

*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.*

  
Jose Lapidote  
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	GLORIDA H MANZANARES	2044 ROCKY HILL DR	<input type="checkbox"/> Add
		DELTONA FL 32738	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

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.

4. Dated 6/27/18 .

Y. Lore Lapidote  
Signature of a member or authorized representative of a member

✓ Jose Lapidote  
Typed or printed name of signer