

LI8000155680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

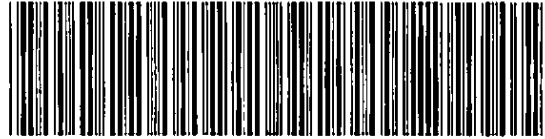
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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FILED  
2019 JAN 18 P 12:41  
T. LEVINE

JAN 3 3 2019

T. LEVINE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Go Growth Sales 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:

Luiz Guilherme Leite Nascimento

Name of Person

Go Growth Sales LLC

Firm/Company

151 Crandon Boulevard Ste 536

Address

Key Biscayne, FL 33149

City/State and Zip Code

nlb@nlbrowncpa.com

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

For further information concerning this matter, please call:

Nancy L Brown

Name of Person

at ( 305 ) 274-4814

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



FILE

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company) 7/13/11

2019 JAN 18 PM 12:21

[illegible]

Curve LLC

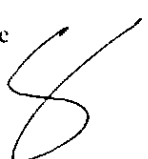


If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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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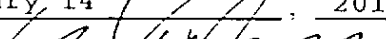
[illegible]

(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.

January 14, 2019



Signature of a member or authorized representative of a member

Luiz Guilherme Leite Nascimento

Typed or printed name of signer