# 18000228048

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(Document Number)
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Amendicc

MAR () 4 2020 I ALBRITTON

## **COVER LETTER**

#### TO: Registration Section Division of Corporations

LINCE INTERNATIONAL LLC.

SUBJECT: \_

Name of Limited Liability Company

The enclosed Articles of Amendment and fce(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert W. Stewart Name of Person Robert W. Stewart P.A. Firm/Company 18001 Old Cutler Road, Suite 648 Address Miami, FL 33157 City/State and Zip Code rstewart@rwspa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 305 at (\_\_\_\_\_\_ Area Code Robert W. Stewart 233-8773 Davtime Telephone Number Name of Person Enclosed is a check for the following amount: □ S60.00 Filing Fee. □ \$25.00 Filing Fee □ \$30.00 Filing Fee & 🔳 \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy

(additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

(additional copy is enclosed)

ARTICLES	OF AMENDMEN	T
ARTICLES	TO OF ORGANIZATIO	T ON nour records.)
	OF	
	CE INTERNATIONAL LLC	FE O
( <u>Name of the Limited Liability</u> (A Florida L		
The Articles of Organization for this Limited Liability Cor Florida document numberL18000228048	npany were filed on	September 25, 2018 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite		:
The new name must be distinguishable and contain the words "Limite	N/A	
		nation "LLC" or the appreciation "LLC.
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered e agent and/or the new registered office address here:	office address on our reco	rds, <u>enter the name of the new registered</u>
Name of New Registered Agent: N/A	·	
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.

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

### MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Fernando Rodrigues	800 S. Douglas Rd, Suite 520	🔜 Add
		Corat Gables, FL 33134	CRemove
			□Change
		<u> </u>	🗆 Add
			🗆 Remove
			Change
	<u> </u>		🗆 Add
			□Remove
			Change
<u>-</u>			🗆 Add
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		<u>_</u>	Change
			🗆 Add
			🗆 Remove
			□Change
			□Add
			🗆 Remove
			🗀 Change

Page	2	of	3
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#### D. If amending any other information, enter changes) here: (Attach additional sheets, if necessary.)

The company will be manager-managed and management of the company will be vested in a manager

or managers from time to time appointed by the members.

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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.

Dated	February 4 2020
	Signature of a member or anhonized representative of a member
	LEOPOLDO A. SCHMALZ
	Typed or printer name of signer