

2/26/2019

L19000039950

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : UNION HSA LLC
Account Number : 12015000070
Phone : (954)770-6227
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
G&F INTERNACIONAL BUSINESS LLC**

Certificate of Status	1
Certified Copy	0
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2019 FEB 26 PM 6:15

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K. SALY
FEB 27 2019

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
19 FEB 26 AM 5:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G&F INTERNACIONAL BUSINESS 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 02/08/2019 and assigned Florida document number L19000039950.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

G&F INTERNACIONAL BUSINESS LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

_____, 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.

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	Luiz Fernando De Figueredo		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

↓
Please see explanation
on the next page

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FLORIDA
STATE
SECRETARY OF
CORPORATIONS

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

Dear State Agent,

The amendment is to make a correction at the following:

1) The company's name should be G&F International Business LLCInternational with an T NOT C

The word INTERNATIONAL has been spelled wrong. In the registration we had it spelled with an C.

2) Authorized Person: The MGR First name SHOULD be spelled as: LUIZ FERNANDO

The last name SHOULD be spelled as; DE FIGUEREDO

At the Sunbiz you have it spelled as:
DE FIGUEIREDO L, UIZ FERNANDO...THIS IS NOT CORRECT

Thank you for your attention to this matter.

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TALLAHASSEE FLORIDA

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

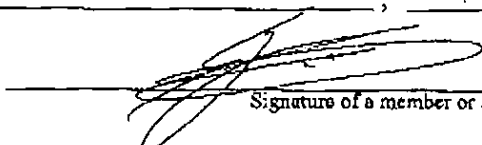
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

Dated February 26, 2019



Signature of a member or authorized representative of a member

Suely Oliveira as POA Representative

Typed or printed name of signee