

MO9000001116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

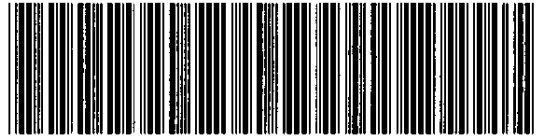
Special Instructions to Filing Officer:

L. SELLERS

JUL 15 2009

EXAMINER

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09 JUL 14 PM 3:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CGI Merchant Capital LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shaabani Munro
Name of Person

CGI Capital Holdings LLC
Firm/Company

8400 NW 36th St Suite
Address

Miami, FL 33166
City/State and Zip Code

smunro@cgimb.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shaabani Munro at (786) 581-4800
Name of Person Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 24, 2009

SHAABANI MUNO
8400 NW 36TH STREET
MIAMI, FL 33166

SUBJECT: CGI MERCHANT CAPITAL LLC
Ref. Number: M09000001116

We have received your document for CGI MERCHANT CAPITAL 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):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 509A00021575

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: CBS Merchant Capital LLC
2. This entity was formed under the laws of: Delaware
3. This entity was authorized to transact business in Florida on 3/23/2009 and its Florida document/registration number is 109000001116
4. The name and address of each manager or managing member is as follows:

Title:
"MGR." = Manager
"MGRM" = Managing Member

Name and Address:

MGR

Leonard Teifeld
8400 NW 236th St STE 220
Miami, FL 33166

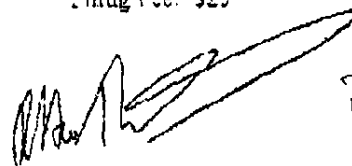
Raoul Thomas
8400 NW 236th St STE 220
Miami, FL 33166

To be
Removed: MGRM

Required Signature: _____

Signature of Manager, Managing Member or Member

Filing Fee: \$25



Raoul Thomas