L130000 76135

(Re	questor's Name)	
· (Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	





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05/24/16--01022--007 **190.00



MAY 25 2016 J SHIVERS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		STMENT LLC		
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears of Liability Company)	n our records.)	
he Articles of Organization for this Limited L	iability Company	were filed on	05/22/2013	and assigned
lorida document number <u>L13000076135</u>	·			
his amendment is submitted to amend the following	lowing:			
. If amending name, enter the new name o	of the limited liabi	ility company here	:	
N/A				
ne new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the desi	gnation "LLC" or the abb	reviation "L.L.C."
nter new principal offices address, if appli	cable:	N/A		
Principal office address MUST BE A STREI	ET ADDRESS)			
	_			
		NIIA	9 8 8	Y24
nter new mailing address, if applicable:		N/A	-	
Mailing address MAY BE A POST OFFICE BOX)				₹ ○ ***1
				<u> </u>
. If amending the registered agent and egistered agent and/or the new registered o			our records, <u>enter t</u>	he name of the
gistered agent and/or the new registered of	ince address nerg	<u>e</u> .		
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Floride	n 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>	Address	Type of Action
MGRM	JOAO SCALLI	2151 CONSULATE DR STE 15	D A dd
		ORLANDO, FL 32837	⊠ Remove
			Change
MGRM VALDIR BALLET	VALDIR BALLET	2151 CONSULATE DR STE 15	Add
		ORLANDO, FL 32837	⊡∕ Remove
		Change	
MGRM .	MAURICIO CARVALHO	2151 CONSULATE DR STE 15	Add
•	ORLANDO, FL 32837	⊠ Remove	
		☐ Change	
	<u></u>	_	Add
			Remove
		Change	
	74	Add	
			□ Remove
		☐ Change	
		Add	
			Remove
			□ Change

-	above. All the rights will be shared as per meeting between as follow bellow:			
	Fabio Rossi : 22.23 % of shares;			<u>_</u>
-	Amylton Rios Silva : 11.11% of shares;			
	Milton Bigucci : 11.11% of shares;			
	Gilberto Giutti : 11.11% of shares;			
	Carlos Levenstein : 11.11% of shares;			
	Jose Pedro Rossi : 11.11% of shares;			
·	Roberto Jurado :11.11% of shares;			
•	Wanderley de Mello : 11.11% of shares;			
,		- ·		
		- ;;	5	
		<u> </u>	M: 2	
•			+	1s 4
		<u> </u>	- E	Since of the second of the sec
		<u> </u>	20	
		3,5		
Note:	ive date, if other than the date of filing:	1al) ling.) Pur late will	suant to not be	605.0207 (3 listed as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a. 90th day after the record is filed.	m. on	the ea	arlier of:
Dated	May som 2016			
	signature of a member of authorized epresentative of a member			_

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

Page 3 of 3

Filing Fee: \$25.00