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TO:18506176383 FROM:4073703120

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Division of Corporations

Florida Department of State

Note: Please print this page and use it as a cover sheet. Expe the fix audit number (shown below) on the top and bonom or all pages of the document

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name :: LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : 120160000067 Phone : (407)370-3686 Fax Number : (407):76-3129

Enter the email address for this busine wentity to be used for future annual report mailings. Loter only one erail address plyase.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CHERRS INVESTMENTS LLC

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COVER LETTER

TO:	Registration Set Division of Cor				
SUBJE		NVESTMENTS LLC			
210,199157	(1	Name of Lim	ited Liability Company		
		Amendment and fec(s) are sub	-		
Picase r	ettim an correspe	CAROLINE LARSON	to the following.		
			Name of Person		
INTERNATIONAL DIVISION BY LARSON LLC					
			Firm/Company		
		7901 KINGSPOINTE PK	WY STE 15		
			Address		
		ORLANDO, FL 32819			
	City/State and Zip Code MAYRA@LARSONACC.COM				
		E-mail address: (to be used for future annual report not	ication)	
For furt	her information of	concerning this matter, please c	all:		
CAROLINE G LARSON		407 370-3686			
	Name (of Person	Area Code Dayting	e Telephone Number	
Enclose	d is a check for t	he following amount:			
₩ \$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is co	atus &

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CHERRS INVESTMENTS 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 1 Florida document number L13000094182	iability Compa	ny were filed on 07/03	/2013	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited li	ability company here	; :	
N/A				
The new name must be distinguishable and contain the	words "Limited Lie	ibility Company." the desi	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	N/A			
(Principal office address MUST BE A STRE				
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and/or agent and/or the new registered office addre		e address on our reco	ords, <u>enter the na</u>	nme of the new registere
Name of New Registered Agent:	N/A			
New Registered Office Address:				
		Enter Florida	street (uldress	/
			, Florida	
		City	-	Zip Code

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, 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
AMBR	DE VASCONCELOS, AUGUSTO	AVENIDA LUCIO COSTA 4250 CASA 05	□ ∧dd
		RIO DE JANEIRO 22630-011 BR	
			□Add
			□Remove
			Change
			Remove F
			□ Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
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			Change
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			□Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N'A E. Effective date, if other than the date of filing: (optional) (If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3xb) 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 secord 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. Signature of a member or authorized representative of a member DE VASCONCELOS, ALEXANDRE B (MGR) Typed or printed name of signee

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