

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000169695 3)))



H210001696953ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

(*)

Account Name : TAXPEOPLE LLC Account Number : I20200000160

Phone : (772)460-1000 Fax Number : (772)777-3071

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 TORMIM'S SERVICE LLC

	THE RESERVE THE PERSON NAMED IN COLUMN TWO
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Corporate Filing Menu

Help

3)))

Address Port St Lucie, FL 34953 City/State and Zip Code dtorming@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person The state of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (additional cony is enclosed) Control of Status & Certificate Opy (additional cony is enclosed)	7 9	ş	COVER LETTER	# - ² -	(((H21000	1 696 95 3
TORMIM'S SERVICE LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Claudio Toledo Ribeiro Name of Person TaxPeople, LLC Plim/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code domnim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person TaxPeople, LLC Plim/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code domnim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person TaxPeople, LLC Plim/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code domnim@yahoo.com.br E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification)				r		
Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Claudio Toledo Ribeiro Name of Person TaxPeople, LLC Firm/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 Clay/State and Zip Code dtornim@yahoo.com.bt E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person TaxPeople, LLC Firm/Company 2855 SW Brighton St TaxPeople TaxPeople TaxPeople TaxPeople TaxPeople TaxPeople TaxPeople TaxPeople TaxPeople Ta	TORMIM'S	SERVICE LLC				
Claudio Toledo Ribeiro Name of Person TaxPeople, ULC Firm/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code dtornim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person S20 PH 4: 55 PT 55 PH 4:	SUBJECT:	Name of L	imited Liability Company			
Name of Person TaxPeople, LLC Firm/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code dtormim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person TaxPeople, LLC Firm/Company 2855 SW Brighton St TaxPeople, LLC Firm/Company 2856 SW Brighton St TaxPeople, LLC Firm/Company Address Firm/Company Firm/Compa						
Firm/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code dtorntim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person Toledo Ribeiro Name of Person Enclosed is a check for the following amount: Securificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)			Claudio Toledo Ribeiro		20: ·	
Firm/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code dtorntim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person Toledo Ribeiro Name of Person Enclosed is a check for the following amount: Securificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)			Name of Person		21 和	****
Firm/Company 2855 SW Brighton St Address Port St Lucie, FL 34953 City/State and Zip Code dtormin@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeito Name of Person The state of Status and Zip Code dtormin@yahoo.com.br Daytime Telephone Number Enclosed is a check for the following amount: State of Status and Zip Code dtormin@yahoo.com.br Daytime Telephone Number State of Status and Zip Code dtormin@yahoo.com.br Daytime Telephone Number State of Status and Zip Code dtormin@yahoo.com.br Enclosed is a check for the following amount: Claudio Toledo Ribeito State of Status and Zip Code dtormin@yahoo.com.br Daytime Telephone Number State of Status and Zip Code Daytime Telephone Number Certificate of Status and Zip Code			TaxPeople, LLC			
Address Port St Lucie, FL 34953 City/State and Zip Code dtorntin@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeito Name of Person The state of Status & Certificate of Status & Certificate of Status & Certificate Opy (additional conv is enclosed) Certificate Of Status & Certificate Copy (additional conv is enclosed)			Firm/Company		— _{ကို} ထ	्रहरूक है
Port St Lucie, FL 34953 City/State and Zip Code dtormim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person The future annual report notification of future annual report noti			2855 SW Brighton St		- SEE - F	
Port St Lucie, FL 34953 Cjry/State and Zip Code dtormim@yahoo.com.br E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeito Name of Person Toledo Ribeito at (772 460-1000 Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is employed)			Address		- 四月 20:52	1
Claudio Toledo Ribeiro T72 460-1000 Area Code Daytime Telephone Number			Port St Lucie, FL 34953		•••	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claudio Toledo Ribeiro at (City/State and Zip Code		_	
For further information concerning this matter, please call: Claudio Toledo Ribeiro Name of Person The following amount: Enclosed is a check for the following amount: See Section Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy			— ·		_	
Claudio Toledo Ribeiro 772 460-1000 at (E-mail addres	ss: (to be used for future annual report noti	tication)		
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee Certificate of Status Certificate of Status (additional copy (senclosed))	For further information of	concerning this matter, pleas	se call:			
Enclosed is a check for the following amount: S25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee \& \Bigcup \\$55.00 Filing Fee \& \Bigcup \\$60.00 Filing Fee, Certificate of Status \$\Bigcup Certified Copy Certified Certified Copy Certified Cert	Claudio Toledo Ribeiro		st (
S25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \& \Bigcup \$55.00 Filing Fee \& \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Bigcup Certified Copy\$ (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status \& Certified Copy (additional copy is enclosed)	Name o	of Person	Area Code Daysin	ie Telephone Num	iber	
Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy	Enclosed is a check for t	he following amount:				
(additional copy is enclosed)	■ \$25.00 Fiting Fee	S30.00 Filing Fee & Certificate of Statu	s Certified Copy	Certif Certif	ficate of Status & fied Copy	

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

(((H210001696953)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-	SERVICE LLC	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L17900121691}{L17900121691}$.	were filed on 06/05/2017	and assigned
This amendment is submitted to amend the following:		202
A. If amending name, enter the new name of the limited liab		APR 2
The new name must be distinguishable and contain the words "Limited Lisb	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		PH S
(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 agent and/or the new registered office address here:	e address on our records, <u>enter t</u>	he name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	F
	, Flo	orida
 -	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>	

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 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 Type of Action <u>Address</u> <u>Title</u> Name 566 22nd Ct MGR **BRUNA A. DOS SANTOS** Vero Beach, FL 32962 __ 🗓 Remove Change DANIEL BRUNO ARRUDA TORMIM 566 22nd Ct **AMBR** Vero Beach, FL 32962 国的 Change \square Add _ □Remove Change Remove ☐ Change □Add Remove Change □Add ☐ Remove

20 APC 20	APR 28 PH
APR 28 PH 4: 5	APPR 28 PH
APR 28 PH 4: 5	APPR 28 PH
APR 28 PH 4: 5	APR 28 PH
APR 28 PH 4: 5	APR 28 PH
APR 28 PH 4: 5	APR 28 PH
APR 28 PH 4: 5	APR 28 PH
APR 28 PH 4: 5	APR 28 PH
APR 28 PH 4: 5	APR 28 PH
APR 28 PH 4: 5	APR 28 PH
28 PH 4: 5	28 PH L
SET 4: 5	SSE PH
775 #: 575 #: 576 #:	Transfer (
77 ÷ 5	
' ;; σι	· (
	' :- 01