

5/13/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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APRIL 99 LLC

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May 17, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

APRIL 99 LLC
3555 NW 83RD AVE
APT 625
DORAL, FL 33122

SUBJECT: APRIL 99 LLC
REF: L18000094852

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mal Solomon
Senior Section Administrator

FAX Aud. #: E21000193223
Letter Number: 421A00010303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

APRIL 99 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 04/16/2018 and assigned Florida document number L18000094852.

This amendment is submitted to amend the following:

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

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**)

11408 SATIRE ST

ORLANDO - FLORIDA 32832

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

FILED

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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>
AMBR	DAYANI SPINA	11408 SATIRE ST	<input checked="" type="checkbox"/> Add
		ORLANDO - FLORIDA 32832	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

2021 MAY 18 AM 10:10

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

BUSINESS NATURE:

THIS CORPORATION MAY ENGAGE IN INTERSTATE CARRIER AND TRANSPORTATION SERVICES
AND OTHER GENERAL SERVICES AND/OR TRANSACT ANY AND ALL LAWFUL ACTIVITIES
OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA
ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 MAY - 11 2021

Signature of a member or authorized representative of a member

LUIS FELIPE DE SOUSA

Typed or printed name of signer