

L20000088593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

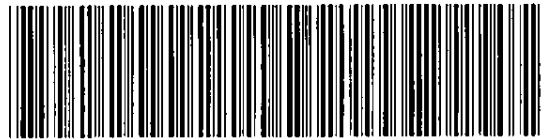
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S. CHATHAM

JUN 2 / 2025

FILED
JUN 26 2025
TALLAHASSEE, FL

2025 JUN 26 PM 3:40

FILED



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
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Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date: 06/26/2025

Name: Cheyenne Davis

Reference #: 2810393

Entity Name: INTER MANAGEMENT LLC

☐ Articles of Incorporation/Authorization to Transact Business

☒ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other ATTN: SUMMER CHATHAM

Authorized Amount: \$

Signature: *Cheyenne Davis*

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

Inter Management 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 03/24/2020 and assigned
Florida document number L20000088593.

This amendment is submitted to amend the following:

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

Inter US Management LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(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 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

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>
MGR	Antonio Cassio Seguro	501 Brickell Key Drive, Suite 202, Miami	☒ Add
			☐ Remove
			☐ Change
MGR	Santiago Horacio Stel	501 Brickell Key Drive, Suite 202, Miami	☒ Add
			☐ Remove
			☐ Change
MGR	Marco Túlio Guimarães	501 Brickell Key Drive, Suite 202, Miami	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

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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.

(b) The 90th day after the record is filed.

Dated _____.

s/ Antonio Cassio Segura

Signature of a member or authorized representative of a member

Antonio Cassio Segura

Typed or printed name of signee