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.

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	will generate a	nother cover sh	neet		

To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : PRIME ACCOUNTING & CONSULTANCY LLC Account Number : I20180000090 Phone : (407)232-6777 Fax Number : (407)710-0533 **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 VALTER TRAILERS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

COVER LETTER

(((H21000406541 3)))

TO: Registration So Division of Con			
	TRAILERS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	FELIPE MARDAKIS		
		Name of Person	
	ASCENT ACCOUNTING	GROUP	
Firm/Company			
7345 W SAND LAKE RD STE 209			
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	FILINGS@ASCENTACCO		
		to be used for future annual report notif	ucanon)
For further information of	concerning this matter, please c	an:	
FELIPE MARDAKIS		407 232-6777 at ()	
Name of Person Area Code Daytime Telep		e Telephone Number	
Enclosed is a check for t	the following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations 'allahassee e Street, Suite 810

→ 18506176383

O 11/03/2021 6:32 AM DocuSign Envelope ID: 4620D0F7-878E-41F1-8FEC-E64DE3C045C3

ARTICLES OF AMENDMENT TO

(((H21000406541 3)))

ARTICLES OF ORGANIZATION **OF**

VALTER TRAILERS LLC		SE SE	202
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Compan	xars on our records.)	2021 NOV
The Articles of Organization for this Limited L	iability Company were filed on	0).	- -
Florida document number L20000285811	·		A
This amendment is submitted to amend the following	lowing:	STATE LORIDA	- : :
A. If amending name, enter the new name of	of the limited liability company		
VALTER HOLDINGS LLC			
The new name must be distinguishable and contain the	words "Limited Liability Company," th	he designation "LLC" or the abbreviation "L.L.C."	_
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE			_
Enter new mailing address, if applicable:	· POV		_
(Mailing address MAY BE A POST OFFICE			_
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address on ouess here: ASCENT ACCOUNTING GR		tered
N 0 1 10% All.	7345 W SAND LAKE RD ST	E 209	
New Registered Office Address:	Enter	Florida street address	
	ORLANDO	, Florida 32819	
	City	Zip Code	_
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register	ed agent and agree to act in th	is 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

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DocuSign Envelope ID: 4620D0F7-87BE-41F1-BFEC-E64DE3C045C3 (((H21000406541 3))) transenuing Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

O 11/03/2021 6:32 AM

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AP	YASMIN R RIBEIRO	8073 BASILICA LN	
		WINTER GARDEN, FL 34787	≣Remove
			Change
MGR	VALTER BARROS RIBEIRO	6309 EARTHGOLD DR	
		WINDERMERE, FL 34786	Remove
			☐ C'hange
MGR	SILVANA RITT RIBEIRO	6309 EARTHGOLD DR	≅Add
		WINDERMERE, FL 34786	Remove
			□Add
			Remove
			□ C'hange
			□Add
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			Change
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			Remove

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Note: If t	date, if other than to date is listed, the date he date inserted in this 's effective date on the	s block does not m	eet the applicable	ate of filing or more to statutory filing re	(optiona han 90 days after filin quirements, this da	i) ig.) Pursuant to 6 te will not be l	605.0207 isted as	(3)(b) the
If the record sa	pecifies a delayed effe	ctive date, but not	an effective time,	at 12:01 a.m. on t	he earlier of: (b)	The 90th day a		
	OVEMBER		1st			SEOKE J LLAHA	2021 NOV -3	
<u> </u>	yaman	· ·				ARY O SSEE,	-3	FILED
			ember or authorize	ed representative of a	member	FLORI	AM 3: 45	Ö.
	YASMIN R RIBEIR		Tuned as printed a			Drii A	45	