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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

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| Section orporations | | |
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| LOG USA ILC | | |
| | ited Liability Company | |
| | - | |
| RAFAELA | Jiei RA Name of Person | |
| 8 LOG | USA LLC Firm/Company | |
| 23269 STA | HE ROAD 7 - SUITE 1] Address | <u>a</u> |
| BOCA RATON | - FL , 33428 City/State and Zip Code | |
| | |) |
| eira | at (508) 831 - 84L | 15 |
| of Person | Area Code Daytime Telep | hone Number |
| the following amount: | | |
| ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Section Corporations | Street Address: Registration Section Division of Corporat: The Centre of Tallah: 2415 N. Monroe Stre | assee |
| | BOCA RATON TRIME INCOME E-mail address: (concerning this matter, please of Person the following amount: S30.00 Filing Fee & Certificate of Status E-section Corporations (27) | Name of Limited Liability Company If Amendment and fee(s) are submitted for filing. Sondence concerning this matter to the following: RAFAELA U'EIRA Name of Person |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



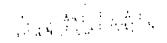
| 8 Log Us | A LLC | 21 MAY PYI 4: 45 |
|---|---|--|
| (Name of the Limited Liabi (A Florid | ility Company as it now appears on o da Limited Liability Company) | our records.) |
| The Articles of Organization for this Limited Liability | Company were filed on | 2/09/21 and assigned |
| Florida document number <u>L 2100 00 67 92</u> | 32 | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lin | nited liability company here: | |
| The new name must be distinguishable and contain the words "Li | mited Liability Company," the designa | ntion "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADD | ORESS) | |
| | *** | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| Taking want to Mill Berli 1991 Of 11ce bong | | |
| | | |
| B. If amending the registered agent and/or register agent and/or the new registered office address here: | | ls, enter the name of the new registere |
| | | |
| Name of New Registered Agent: | ·- | |
| New Registered Office Address: | | |
| | Enter Florida str | reet 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 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 21 MAY 11 FR 4: 45 | Type of Action |
|--------------|-------------------|----------------------------|----------------|
| MGR | ERIC NUNES JIEIRA | 9273 SW 8TH STREET AF 317 | <u>2</u> ⊠Add |
| | | BOCA RATON -FL -33428 | _ □Remove |
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| n effective <u>te:</u> If the | date is listed, the c date inserted in | an the date of fili late must be specific a this block does not the Department of | ind cannot be prior to o timeet the applicabl | late of filing or more to e statutory filing red | (optiona han 90 days after filin quirements, this da | g.) Pursuant to 605,0207 e will not be listed as |
| ecord specis filed. | cifies a delayed o | effective date. but n | ot an effective time | , at 12:01 a.m. on th | ne earlier of: (b) | The 90th day after the |
| ted | MAY, O | Η | . 2021 | | | |
| - | | Signature of | a member or authorit | d representative of a | member | |
| | | | | M . | | |

Date of this notice: 02-08-2021

Employer Identification Number:

86-1949858

Form: SS-4

Number of this notice: CP 575 B

8 LOG USA LLC RAFAELA VIEIRA MBR 23269 STATE ROAD 7 STE 119 BOCA RATON, FL 33428

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 86-1949858. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065 03/15/2022

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is 8LOG. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

Keep this part for your records.

CP 575 B (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 B

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Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 02-08-2021 () –

EMPLOYER IDENTIFICATION NUMBER: 86-1949858

FORM: SS-4

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INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 8 LOG USA LLC RAFAELA VIEIRA MBR 23269 STATE ROAD 7 STE 119 BOCA RATON, FL 33428