L21 000 090 502

(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/F	hone #)
PICK-UP WAI	MAIL
(Business Entity	(Name)
(Dusiness Entry	, vame,
75	
(Document Nun	iber)
Certified Copies Certifi	tates of Status
Special Instructions to Filing Officer	
Office Us	e Only



100395270891

19/11/22--01015--018 **29.90

PILED
2022 OCT II MIII: 56
SECRETARY OF STATE

COVER LETTER

		istration Sec sion of Corp						
era nez		ARBTRUST	VENTU	RE LLC				
SUBJEC				Name of Lin	ited Liability Company			
The encl	osed	Articles of A	amendmet	it and fee(s) are sub	omitted for filing.			
Please re	turn	all correspon	idence cor	cerning this matter	to the following:			
			LEO T	EIXEIRA				
					Name of Person			
			MIGH	TY SOLUTIONS			20 S	
					Firm/Company		ZZ O	
			601 M.	 ARKET STREET S 	UITE 470204		2022 OCT 11 AM 11: 56 SECRETARY OF STATE TALLAHASSEE, FL	
					Address		ESS —	
			KISSIN	IMEE.FL 34747			SEC.	
			INFO@	MIGHTYSOLUTION	City/State and Zip Code ONSAUS		FLE FLE FLE FLE FLE FLE FLE FLE FLE FLE	
				E-mail address: (to be used for future annual repo	ort notification)		
For furth	ier in	formation co	ncerning t	his matter, please c	all:			
LEO TE	IXEI	RA			407 65522:	55		
Name of Person				Daytime Telephone Number				
Enclosed	Lis a	check for the	e followin	g amount:				
D x \$25.	00 Fi	iting Fee		0 Filing Fee & tificate of Status	☐ \$55.00 Filing Fee & Certified Copy cadditional copy is enclosed	d) Certified	icate of Status &	
Mailing Address: Registration Section Division of Corporations		Street Addre Registratio	on Section					
		. Box 6327		115		f Corporations 2 of Tallahassee		
	Tall	lahassee, F	L 32314		2415 N. M	onroe Street, Suite 8	10	
				i	Tallahacea	o 171 - 32303	•	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARBTRUST VENTURE 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 1.21000090502	were filed on 02/23/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "LLC" or the abbreviation "LL.C."
Enter new principal offices address, if applicable:	200 S BISCAYNE BLVD
(Principal office address MUST BE A STREET ADDRESS)	SUITE 401
	MIAMI, FL 33131
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: Name of New Registered Agent: New Registered Office Address:	SECRETARY OF SECRE
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	,
I hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is address, I hereby confirm that the limited liability
If Char	nging 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>	Type of Action
MGR	GABRIEL STORCK DA SILVA	RUA PADRE AGOSTINHO 2885	
		CURITIBA, PR 80710-000 BR	□Remove
			□ Change
DIRECTO	LEONARDO DE SOUZA	601 MARKET STREET	□ Add
		470204	■Remove
		KISSIMMEE, FL 34747	Change
AMBR	EVERTON LUIS DOS SANTOS	R EDUARDO SPRADA 2301 CASA 9	□Add
		CURITIBA, PR 81210-370 BR	<u>்</u> த∰R EB ove
			ECRETI
			ARY OF
			E. F. C. F. C. Prove
			□Change
			□Add
			Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			□Change

		mation, enter change(s) here: (Attach additional sheets, if necessary.)	
			·
			
			
			· -
		SEC TA	2022
			рст
		ARY MAS	- [
			= ;
			======================================
		ויין	
			<u></u>
(If an e	If the date inserted in this	the date of filing:	int to 605.020 1 be listed a
the rec	ord specifies a delayed effectiled.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th of	day after the
Date	d SEPTEMBER 29TH	20/2	
		Signature of a member or authorized representative of a member	
	DENIS EVARISTO	DA CRUZ	
	101.300 LV AIXISTO	()	

Filing Fee: \$25.00