

L21000274540
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((1123000344647 3))



H230003446473A9C0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : YOBI TECHNOLOGY,LLC
Account Number : 120200000112
Phone : (407)351-6656
Fax Number : (407)612-2313

2023 OCT 1 11:32 AM

RECEIVED

2023 OCT -2 AM 9:22

DEPT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: ACCT@EXCEL TOTAL BUSINESS.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LDB AUTO INVESTMENTS LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

SEARCHED
SERIALIZED
OCT -3 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LDB AUTO INVESTMENTS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTONIO CARDOSO
Name of Person
EXCEL TOTAL BUSINESS
Firm/Company
7065 WESTPOINTE BLVD #301
Address
ORLANDO, FL 32835
City/State and Zip Code
ACCT@EXCELTOTALBUSINESS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO CARDOSO 407 351-6656 X#102
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 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 Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LDB AUTO INVESTMENTS, 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 06/02/2021 and assigned
Florida document number L21000274540

This amendment is submitted to amend the following:

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

N/A

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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
 AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------------------|------------------------------------|--|
| MGR | Fernando G.L. Portes | 2309 S.Orange Blossom Trail Unit A | <input checked="" type="checkbox"/> Add |
| | | Orlando, FL 32805 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Christiano G.L. Portes | 2309 S.Orange Blossom Trail Unit A | <input checked="" type="checkbox"/> Add |
| | | Orlando, FL 32805 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Ane Gisele O.D Brandao | 2309 S.Orange Blossom Trail Unit A | <input type="checkbox"/> Add |
| | | Orlando, FL 32805 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| MGR | Francisco M.Brandao Junior | 2309 S.Orange Blossom Trail Unit A | <input type="checkbox"/> Add |
| | | Orlando, FL 32805 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

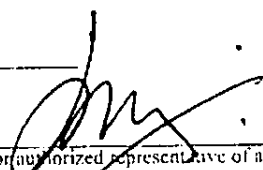
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Blank lined area for amending information, crossed out with a diagonal line.

E. Effective date, if other than the date of filing: 09/30/2023 (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 (J)(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: (h) The 90th day after the record is filed.

Dated ORLANDO, SEPTEMBER 30RD 2023


Signature of a member or authorized representative of a member

ANTONIO CARDOSO - Register Agent

Typed or printed name of signer