

h21000379051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

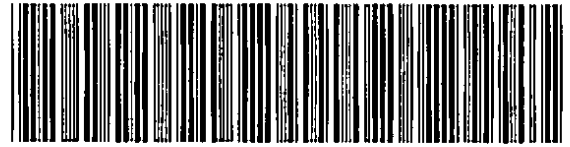
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2022 JUN 13 PM 2:03
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Amend/Name Char

JUN 30 2022

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COVER LETTER

TO: Registration Section
Division of Corporations

RECEIVED

SUBJECT: CHARLES E.A TRANSPORT USA LLC

Name of Limited Liability Company

2022 MAR 31 AM 7:56

SECRETARY OF STATE
TALLAHASSEE, FL

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

Please return all correspondence concerning this matter to the following:

ROSI LUCE ALVES

Name of Person

TRUST SOLUTION TAX & BOOKKEEPING LLC

Firm Company

5950 LAKEHURST DR ST#222

Address

ORLANDO - FL 32819

City/State and Zip Code

ROSI@TRUSTSOLUTIONTAX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSI LUCE ALVES

407

7059147

at ()

Name of Person

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2022

ROSI LUCE ALVES
5950 LAKEHURST DR ST
#222
ORLANDO, FL 32819

SUBJECT: CHARLES E.A TRANSPORT USA LLC
Ref. Number: L21000379051

We have received your document for CHARLES E.A TRANSPORT USA LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We have received your document for CHARLES E.A TRANSPORT USA LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Yvette Scott
Supervisor

Letter Number: 722A00008654

FILED
2022 JUN 13 PM 2:03
and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

GENERAL TILE AND CLEANING LLC

(Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

_____, Florida _____
City Zip Code

If Changing Registered Agent, Signature of New Registered Agent

Title	Name	Address	Type of Action
AMBR	EMIRIANE APARECIDA GONCALVES	6088 RALEIGH ST APT 1704	☒ Add
		ORLANDO - FL 32835	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
		☐ Add	
		☐ Remove	
		☐ Change	
		☐ Add	
		☐ Remove	
		☐ Change	
		☐ Add	
		☐ Remove	
		☐ Change	

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

PLEASE ENTER WITH EIN NUMBER 87-2336785

OBS: MAKE SURE THE NAME OF THE NEW PARTNER EMIRIANE APARECIDA GONCALVES

DA SILVA WILL BE CORRECT.

THANK YOU.

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 23 March

2022

Signature of member or authorized representative of a member

CHARLES PINTO MOIRAES

Typed or printed name of signee