

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L22000174417301

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((H220001744173))



H220001744173ABC

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

From: Account Name : EXPAT CONSULTING CORP.  
 Account Number : I20190000096  
 Phone : (407)745-1112  
 Fax Number : (407)641-8083

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

Email Address: ACC@EXPATCONSULTING.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 PPC BUSINESS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

2022 MAY 26 AM 9:24

CORPORATION STATE OF FLORIDA

2022 MAY 26 PM 1:47

APPROVED AND FILED

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PPC BUSINESS 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:

NILTON C FREGNI

\_\_\_\_\_  
Name of Person

EXPAT CONSULTING CORP

\_\_\_\_\_  
Firm/Company

8615 COMMODITY CIRCLE, STE 11

\_\_\_\_\_  
Address

ORLANDO/FL 32819

\_\_\_\_\_  
City/State and Zip Code

ACC@EXPATCONSULTING.COM

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

For further information concerning this matter, please call:

NILTON C FREGNI

407 745-1112

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PPC BUSINESS 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 03/11/2022 and assigned Florida document number L22000124301

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

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.

If Changing Registered Agent, Signature of New Registered Agent

[Handwritten signature]

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>	<u>Type of Action</u>
AMBR	PP INVESTMENTS LLC	8615 COMMODITY CIRCLE	<input type="checkbox"/> Add
		ORLANDO, FL 32819	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PP BUSINESS LLC	8615 COMMODITY CIRCLE, STE 11	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32819	<input type="checkbox"/> Remove
			<input 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
			<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.)**

*(This area is crossed out with a diagonal line, indicating no amendments.)*

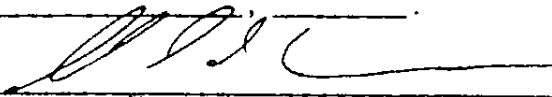
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 MAY 16, 2022



Signature of a member or authorized representative of a member

CELIO ANDRINO DA CONCEICAO

Typed or printed name of signer