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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I2019000068 Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address: contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 725 BUSINESS SOLUTIONS LLC

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JUN 18 2024

COVER LETTER

TO: Registration 8 Division of Co			•
SUBJECT! 725 BUS	ness solutions l _k c		*
JODALETT		nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following.	
	Rubem Souza		
•		Name of Person	
	Medeiros Souza corp		
		Firm'Company	
	1711 Amazing Way, Ste 2	213	
Please return all correspondence concerning this matter to the following. Rubem Souza Name of Person Medeiros Souza corp			
	Ococe, FL 34761		
		City/State and Zip Code	
For further information		·	tilication)
	evincertung uns matter, prease c	an an	
Rubent Souza			
Name (of Person	Area Code Daytie	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$35,00 Filing Fee	☐ \$30 00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S50.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration Se	oction
Division of C		Division of Co	
P.O. Box 632	27	The Centre of T	Tallahassee Tallahassee
Tallahassee, l	FL 32314	2415 N. Monre	e Street, Suite \$10

Tallahassee, FL 32303

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

725 BUSINESS SOLUTIONS LL						
1 (Name of the Lin	ited Linbility Compa (A Florida Limited	any as it now appears on our Liability Company)	records.)			
The Articles of Organization for this Limited Liability Company were filed on 10/14/2022				and assigned		
Florida document number L22000444437	 .					
This amendment is submitted to amend the fol	llowing:					
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	thy Company." the designation	n "LLC" or the abbre	eviation "L L_C "		
Enter new principal offices address, if applicable: 16.666 Greens Edge Cir		ir APT 62, Weston, FL 33326.				
(Principal office address MUST BE A STRE	ET ADDRESS)					
Enter new mailing address, if applicable:		16.666 Greens Edge Cir	APT 62, Weston,	F1, 33326.		
Mailing address MAY BE A POST OFFICE	E BOX)					
				77 18		
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office a ess here:	address on our records,	enter the name o	of the new registered		
Name of New Registered Agent:	MEDEIROS S	OUZA CORP	, 1 ,	2 7 1		
New Registered Office Address:	1711 Amazing	Way, Ste 213	!			
<u> </u>		Enter Florula street	address	53		
	Ococc		, Florida _ ³⁴⁷⁶¹	· · · ·		
		Chy		Zip Code		

New Registered Agent's Signature, if changing Registered Agent:

1.

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

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Adriana Rezende Mutter	16.666 Greens Edge Cir APT 62, Weston, FL 33326	□ Add
			[]Remove
			= Change
MGR	Marcelo Murrer	16.666 Greens Edge Cir APT 62, Weston, FL 33326	□∧dd
			□Remove
			= Change
			ĽIAdd
i			□Remove
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Effective date, if other that (If an effective date is listed, the d. Note: If the date inserted in document's effective date or	inis block does no	of meet the applic	able statutory fr	(opti r more than 90 days afte ling requirements, thi	onal) r filing) Pursuant to 605. s date will not be liste	.0207 (3)(ed as the
the record specifies a delayed e ord is filed.	ffective date, but r	not an effective ti	ime, at 12:01 a.r	n. on the earlier of: (1	n) The 90th day after	the
Dated Orlando		06/17/202	4			
* ** *. *.		 :		\		

Typed or printed name of signee

2024-06-17 20:37:24 GMT

14076046519

From: RUBEM SOUZA

To:

Page 7 of 7