Houida Department of State

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.

(((H24000040128 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC SOLUTIONS LLC Account Number : I20190000050

Phone : (888)406-7602

Fax Number : (305)925-1124

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

Email Address:	coid2917@inc.solutions	
Email Address:	CDIG2917@inc.solutions	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ANSEL ARAUJO CONSULTING LLC

Certificate of Status	U
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Page Count	05
Estimated Charge	\$25.00

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Help

COVER LETTER

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TO: Registration S Division of Co			
	RAUJO CONSULTING LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	DIECSON VILARINO		
		Name of Person	
	INC SOLUTIONS, LLC		
		Firm: Company	
28 W FLAGLER ST, ST		E 300B	
	Address		
	MIAMI, FL 33130		
City/State and Zip Code COID2917@INC.SOLUTIONS			
	_	to be used for future annual report notification)	
For further information	concerning this matter, please c	alf:	
DIECSON VILARINO		888 406-7602	
Name	of Person	at () Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
№ \$25 00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee. Certified copy (additional copy is enclosed)	
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

From: . .

(((H24000040128 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANSEL ARAUJO CONSULTING LLC		
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 05/09/2023 and assigned florida document number L23000228705		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
ANSEL ARAUJO LLC		
The new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "LEC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
		77.05E(1.05E
Enter new mailing address, if applicable:		30
(Mailing address MAY BE A POST OFFICE BOX)		SS
	-	THE CO
		- 10
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
Commence Control and Control a	Enter Florida street address	
	. Floric	da
	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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

(((H24000040128 3)))

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 = N $AMBR = A$	lanager athorized Member		
Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
			DRemove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			🗆 Remove
			□Change
			DAdd
			∏Remove

□Change

_ 🗆 Change

(((H24000040128 3)))

D. If amending any other informat	tion, enter change(s) here:	(Attach additional sheets, if necessary.)
		
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	t be specific and cannot be prior to cock does not meet the applicable	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0207 le statutory filing requirements, this date will not be listed as
record is filed		e, at 12:01 a m. on the earlier of (b). The 90th day after the
JANUARY 22 Dated	2024	
	<u> </u>	zed representative of a member
1/_	Signature of a member or authoriz	zed representative of a member
ANSELMO LIMA DE A	RAUJO	

Typed or printed name of signee