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SECRETARY OF STATE
AND TALL AHASSEE, FLORIDA

TILED

COVER LETTER

Division of Corp	•	•	
Furtado & Fe	rreira Investments LLC		•
SUBJECT:	Name of Limit	ed Liability Company	·
	Amendment and fee(s) are subm		
Please return all correspon	idence concerning this matter to	the following:	
	Steven B. Greenfield, Esq.		
		Name of Person	·
	Greenfield Law Group		
		Firm/Сотралу	
	2255 Glades Road, Suite #3	24-A	
		Address	
	Boca Raton, Florida 33431		
	sgreenfield@florida-legal.ne	City/State and Zip Code t	
	E-mail address: (t	a be used for future annual report not	ification)
For further information c	oncerning this matter, please ca		
Steven B. Greenfield		561 561-288-89	66
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addre Registration Division of C	Section	Street Address: Registration S Division of Co	
P.O. Box 632	•	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Furtado & Ferreira Investments LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited I	gy as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li Florida document number		were filed on	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applic	able:	3617 NW 5th Terrace, Boca Raton, FL 33	431
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:		PO Box 480453, Boca Raton, FL 33448	2023 AUG -4 SECKETAR ALLAHASS
(Mailing address MAY BE A POST OFFICE BOX)			SSET I
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office ess here:	address on our records, enter the nam	~~ 🖂
Name of New Registered Agent:	Steven B. Gree	enfield	
New Registered Office Address:	2255 Glades R	toad, Suite #324-A	
	Boca Raton	Enter Florida street address 334 Florida	131
	<u> </u>	City Florida	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

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>	Address	Type of Action
			□Add
			□Remove
			□Change
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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 Note: If the date inserted in this block does not meet the applicable state	filling or more than 90 days after filling.) Pursuant to 6 utory filling requirements, this date will not be li	05,0207 sted as
document's effective date on the Department of State's records.		
e record specifies a delayed effective date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th day at	iter the
rd is filed.		
Dated 08/02/2025		
Dated		

Filing Fee: \$25.00

Typed or printed name of signee