

**LOS000091093**

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : AIT PLUS CONSULTING  
Account Number : I20080000061  
Phone : (407) 582-9830  
Fax Number : (407) 582-9832

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

**NASCIMENTO BRICK AND PAVERS, LLC**

Certificate of Status	0
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**T. HAMPTON**

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PAGE 001/001

Florida Dept of State

PAGE 05



January 27, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

NASCIMENTO BRICK AND PAVERS, LLC  
600 CANNON RIDGE DR  
# 1913  
ORLANDO, FL 32818

SUBJECT: NASCIMENTO BRICK AND PAVERS, LLC  
REF: L05000091093

RECEIVED  
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TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must be signed by a member or manager of the limited liability company.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

FAX Aud. #: H09000016869  
Letter Number: 109A00002855

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: NASCIMENTO BRICK AND PAVERS, 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:

PEDRO NASCIMENTO

(Name of Person)

NASCIMENTO BRICK AND PAVERS, LLC

(Firm/Company)

600 CANNON RIDGE DR # 1913

(Address)

ORLANDO, FL 32818

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA PINHEIRO

(Name of Person)

at ( 407 ) 582-9830

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

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☐ \$55.00 Filing Fee &  
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☐ \$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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

NASCIMENTO BRICK AND PAVERS, LLC

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

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DIVISION OF CORPORATIONS  
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The Articles of Organization for this Limited Liability Company were filed on 09/15/2005 and assigned  
Florida document number L05000091093.

This amendment is submitted to amend the following:

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

N/A

The new name must be distinguishable and end with 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)

**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)

(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	ESTEBAN O ESCOBAL FAGUA	600 CANNON RIDGE DR # 1913 ORLANDO, FL 32818	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated JANUARY 23, 2009

*Pedro Nascimento*  
Signature of a member or authorized representative of a member

PEDRO NASCIMENTO

Typed or printed name of signee

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Filing Fee: \$25.00

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