Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARBOSA LEGAL Account Number : I20110000049 Phone : (305)501-4680 Fax Number : (305)359-9543

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address: renewals@barbosalegal.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GPU INVESTMENTS, LLC

Certificate of Status	0
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COVER LETTER

TO: Registration Section Division of Corporations

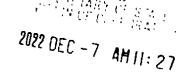
	ESTMENTS LLC			
	Name of Lin	uited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
lease return all correspo	ondence concerning this matter	to the following:		
	Erika Kitaoka da Silva			
		Name of Person		
	Barbosa Legal			
		Firm Company		
	407 Lincoln Road PH-NE			
		Address		
	Miami Beach, FL 33139			
		City/State and Zip Code		
	renewals@barbosalegal.com			
	oncerning this matter, please c		nication)	
Erika Kitaoka da Silva		305 501-4680 at ()		
Name o	f Person	Area Code Daytin	ne Telephone Number	
inclosed is a check for the	ne following amount:			
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Co The Centre of	rporations	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

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Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GPU INVESTMENTS 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 $\frac{08/03/2012}{1}$ and assigned Florida document number $\frac{1.12000100414}{1.00000000000414}$ 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 407 Lincoln Rd Enter new principal offices address, if applicable: PH-NE (Principal office address MUST BE A STREET ADDRESS) Miami Beach FL 33139 407 Lincoln Rd Enter new mailing address, if applicable: PH-NE (Mailing address MAY BE A POST OFFICE BOX) Miami Beach FL 33139 B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here: Barbosa Legal Name of New Registered Agent: 407 Lincoln Rd PH-NE New Registered Office Address: Enter Florida street address Miami Beach City 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

/S/ Ileana York on behalf of Barbosa Legal

If Changing Registered Agent, Signature of New Registered Agent

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company has been notified in writing of this change.

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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
MGR	ADEPT COMPANY LIMITED	RUA INHAMBU 97 APT 03	
		SÃO PAULO, SP. Brazil	■Remove
		CEP 04088-000	[]Change
MGR	MAURO A BENATI	407 LINCOLN RD PH-NE	
		MIAMI BEACH	[]Remove
		FL 33139	□Change
			□Add
			[JRemove
			□Change
			DAdd
			□Remove
			□Change
			□Remove
			[i]Change
			□Add
			Remove
			☐Change

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D. If amending any other informa	ition, enter change(s) here: (Attach additiona	al sheets, if nece 2009, DEC
N/A	(((H22000404785 3))) ition, enter change(s) here: (Attach additiona	- VEL -7 AMII: 23
		
<u>.</u>	——————————————————————————————————————	
E. Effective date, if other than the	date of filing:	(ontional)
(If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	date of filing: It be specific and cannot be prior to date of filing or more ock does not meet the applicable statutory filing reepartment of State's records.	than 90 days after filing.) Pursuant to 605.0207 (3)(bequirements, this date will not be listed as the
If the record specifies a delayed effective record is filed.	e date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
December I	2022	
/s.	/Ileana York	
	Signature of a member or authorized representative of	a member
Ileana York Eso, as Aut	horized Representative of the Members	
	Typed or printed name of signee	

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Filing Fee: \$25.00