# L13000082716

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PICK-UP	WAIT	MAIL	
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Amend	· /		

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T. Burch (ICT 1 1 2013)

(Prod)

### **COVER LETTER**

TO:

SUBJECT:

Registration Section
Division of Corporations

FEDERAL ART USA 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:

# Marcelo Tavares

Name of Person

# FEDERAL ART USA LLC

Firm/Company

1650 Sand Lake Rd. Suite 245

Address

Orlando FI 32809

City/State and Zip Code

federalart@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

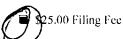
## Marcelo Tavares

\_\_407\_802**-715**2

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



□\$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 ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### FEDERAL ART USA 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 06/06/2013	and assigned
Florida document number L13000082716		, 
		<u>~</u>
This amendment is submitted to amend the following:		
_		多級 一 三
A. If amending name, enter the new name of the limited liability company here:		O PR
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation	THE abbreviation
Enter new principal offices address, if applicable:	1650 Sand Lake Rd. St	uite 245
(Principal office address MUST BE A STREET ADDRESS)	Orlando FI 32809	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	1650 Sand Lake Rd. St	uite 245
	Orlando FI 32809	_
		<del></del> _
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florida	
	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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Ma MGRM = M	nager Ianaging Member	Update Address ONLY as shown bellow	
<u>Title</u>	<u>Name</u>	Address <u>T</u>	ype of Action
MGR	Marcelo Tavares	1650 Sand Lake Rd. Suite 245	<b>✓</b> Add
		Orlando Fl 32809	Remove
SEC	Marcelo Tavares	1650 Sand Lake Rd. Suite 245	<b>✓</b> ∧dd
		Orlando FI 32809	Remove
TREA	Marcelo Tavares	1650 Sand Lake Rd. Suite 245	<b>✓</b> Add
		Orlando FI 32809	Remove
			Add
		TALLAHA AHA	Remove
		SSEE FLOOR	
		LORIDA	Remove
			Add
			Remove

Page 3 of 3

Filing Fee: \$25.00

13 OCT 10 PH 1: 50
SECRETARY OF STATE
ANALYSES STORIDA