Page: 2 11/11/2022 04:37 PM TO:18506176383

## Floridal Department of State Division of Corporations Electronic Filing Cover Sheet

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.

FROM: 4079929407

(((H220003865313)))



H220003865313ABC/

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SOUSA & ASSOCIATES INC

Account Number : I20190000111 Phone : (407)800-7028 Fax Number : (407)992-9407

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email .	Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONFIDENCE INVESTMENT ADVISORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

NOV 15 2022

e:	5	11/11/2022	04:37	PM	TO:1850617638	33 FROM:4079929407
•	•				COVER LETTE	R
TO:		gistration Section vision of Corporation	•			
SUF	BJECT:	CONFIDENCE IN	VESTMENT	ADVI	SORS, LLC	
			Nan	ne of Lii	mited Liability Company	
The	enclosed	d Articles of Amendm	ent and fee(s	) are su	bmitted for filing.	
Plea	ise returi	all correspondence co	oncerning thi	s matte	r to the following:	
		Maria	C Sousa			
		****			Name of Person	
		Sousa	& Associca	tes Inc		
			•		Firm/Company	
		5728	Major Blvd :	Stc 309		
					Address	
		Orlan	do Florida 3.	2819		
					City/State and Zip Code	
		info@:	sousaacc.con	•		
			E-mail	address:	(to be used for future annual	report notification)
For	further i	nformation concerning	this matter,	please	call:	
Mar	ria C Sou	usa			407 80	007028
		Name of Person			Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

11/11/2022 04:37 PM TO:18506176383 FROM: 4079929407 Page:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF  CONFIDENCE INVESTMENT ADVISORS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida document number	: 6 11/11/	2022 04:37 PM TO:18506 ARTICLES OF A TO	MENDMENT	9407
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)				The state of the s
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)				Sold of the second of the seco
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)		(Name of the Limited Liability Company (A Florida Limited Lia	r as it now appears on our records.) ability Company)	Contract &
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)	The Articles of Organiz	ration for this Limited Liability Company v	vere filed <u>11/21/2013</u>	and assigned
A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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)	on Florida document nu	imber 1.13000163876		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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)	This amendment is subi	nitted to amend the following:		
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)	A. If amending name,	enter the new name of the limited liabili	ty company here:	
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	The new name must be disti	nguishable and contain the words "Limited Liability	y Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Enter new principal o	ffices address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	(Principal office addre.	SS MUST BE A STREET ADDRESS)		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)				
	Enter new mailing add	dress, if applicable:		
	(Mailing address MAY	BE A POST OFFICE BOX)		
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:			ldress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	Name of New	Registered Agent:		
New Registered Office Address:  Enter Florida street address	New Registere	ed Office Address:	Enter Florida street address	

## 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.

Cnv

Page:

7 11/11/2022 04:37 PM

TO:18506176383 FROM:4079929407

. 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
AMBR	SPOT GLOBAL CORP	13660 CHAUVIN AVE	&
		ORLANDO, FL 32827	
			□Change
			□Add
			□Change
			TALL TO AND TO AND THE
			Change 5:
			Remove
			Change
•	Parkers - 110 - 10		□Add
			□Remove
			☐ Change
			□ Add
		<u> </u>	□Remove

	13,4,1,1,1		· · · · · · · · · · · · · · · · · · ·					
								<del></del> -
								<del>_</del>
	<del></del>					****		
					1			<del></del> -
							•	
	•					<u> </u>	-	
			<del>-</del>		=			22
							<u> </u>	2022 NOV
				<u> </u>			<u> </u>	4 N
							551	
							. FL	
-							FLERIO	
				<u>.</u>			<u>.</u>	
E.Hective (It an effecti	e date, if other than the dive date is listed, the date must	iate of filing: be specific and c	annot be prior t	o date of filing o	r more than 90 da	(optional) ys after filing.	) Pursuant	to 605.02
	the date inserted in this bloom's effective date on the Dep			ble statutory fi	ling requireme	ats, this date	will not b	e listed :
he record s ord is filed	specifies a delayed effective f.	date, but not a	n effective tin	ne, at 12:01 a.i	n. on the earlie	rof: (b) Th	e 90th day	after th
	November, 11th	·	2022	. <b>.</b>				
Dated								

Typed or printed name of signee

Page: 8 11/11/2022 04:37 PM TO:18506176383 FROM:4079929407