

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : V & A BUSINESS SOLUTION INC
Account Number : I20150000021
Phone : (954)865-6607
Fax Number : (954)933-2634

****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
4111 N.E. 2ND WAY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 JUN -6 PM 3:24

2022 JUN -6 AM 11:27

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

4111 N.E. 2ND Way, LLC

SUBJECT: _____
Name of Limited Liability Company

LI3000164033

DOCUMENT NUMBER: _____

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto de Oliveira Rodrigues

Name of Person

4111 N.E. 2ND Way, LLC

Name of Firm/Company

9146 SW 5TH STREET APT C

Address

Boca Raton, FL 33428

City/State and Zip Code

ssotomayor_spa@hotmail.com

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

For further information concerning this matter, please call:

Sofia Sotomayor

561

400-6716

at (_____) _____

Name of Person

Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4111 N.E. 2ND WAY, 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 11/22/2013 and assigned
Florida document number L13000164033.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9146 SW 5TH STREET UNIT C

BOCA RATON FL 33428

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9146 SW 5TH STREET UNIT C

BOCA RATON FL 33428

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:

ROBERTO DE OLIVEIRA

New Registered Office Address:

9146 SW 5TH STREET UNIT C

Enter Florida street address

BOCA RATON

City

Florida 33428

Zip Code

2022 JUN -6 AM 11:07
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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.

Roberto de Oliveira
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>	<u>Address</u>	<u>Type of Action</u>
P	CAIOLA, CYNTHIA	2503 NORTH RIVERSIDE DRIVE	<input type="checkbox"/> Add
		POMPANO BEACH FL 33062	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	GOLDSTEIN, HOWARD JAY	2503 NORTH RIVERSIDE DRIVE	<input type="checkbox"/> Add
		POMPANO BEACH FL 33062	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	ROBERTO DE OLIVEIRA	9146 SW 5TH STREET UNIT C	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33428	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SOFIA SOTOMAYOR	9146 SW 5TH STREET UNIT C	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33428	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00