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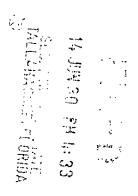
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COVER LETTER

TO: Registration S Division of Co			in ∰ A
SUBJECT:	Fusebro &	ricia Pavels L	LC
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Eus	Phia Garda	
	Eusisi	Phia Gardias Name of Person Jewaco Firm/Company	
	277 Co	upetition Dr.	
	- Hiss,	F1- 34743 City/State and Zip Code	
	E-mail address: (0.5CO & Live . C to be used for future annual report notif	6M ication)
For further information of	concerning this matter, please co	all:	
Eusebio Name o	Genda Person	at (<u>407</u>) 346 Area Code Daytime	- 0850 Telephone Number
Enclosed is a check for t	he following amount:		·
\$25.00 Filing Fee	☐ \$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

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**

EUSehi (Name of the Limited	TO GAN CI C d Liability Company as it A Florida Limited Liability	Pavels now appears on our reco	rds.)		
The Articles of Organization for this Limited Lial	bility Company were f		201 <u>4</u> a	and assigned	
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited liability co	mpany here:			
The new name must be distinguishable and end with the we Enter new principal offices address, if applical (Principal office address MUST BE A STREET	ble:	npany," the designation "I.	LC" or the abbrevi	ation "L.L.C."	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>)			3	
B. If amending the registered agent and/or registered agent and/or the new registered office		ddress on our recor	ds, enter the 1	name of the	e new
Name of New Registered Agent:	Gabriel	Bueno	2		
New Registered Office Address:	777	Competition Enter Florida street addr	<i></i> 1	っしかし	- -
New Registered Agent's Signature, if changing Re	City		Florida 	57 / 7 Code	

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Ai	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Gabriel Pluera	277 competition or:	Add
		277 Competition Dr. Kiss, Fl. 34743	□ Remove
			□ Add
			□ Remove
			Add
			□ Remove
			A JULY A
			Remove
		-	Add
			□ Remove
			Add
			Remove
			

	
	date, if other than the date of filing: (optional) e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after s document is filed by the Florida Department of State)
e date this	
e date this	s document is filed by the Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00

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