L14000144093

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700349729047

88/17/28--81828--862 **25.00

 $\overline{}$

OCT 0 3 2020

COVER LETTER

	Registration Se Division of Cor			
enio iro		ADE CONSULTING, LLC		
SUBJEC	.li <u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		MARCELO PARIS		
			Name of Person	
		PARIS MANAGEMENT	T CONSULTING, INC Firm/Company	
		1756 NW 23RD ST STE I	3	
			Address	
		MIAMI, FL 33142		
			City/State and Zip Code	
		MARCELO@PARISCPA.		
			to be used for future annual report n	olification)
For furth	er information of	oncerning this matter, please co	all:	
MARCE	ELO PARIS		786 208-6739	
	Name o	f Person		ime Telephone Number
Enclosed	l is a check for the	ne 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 (additional copy is enclosed)
	Mailing Address Registration	Section	Street Address: Registration S	
	Division of C P.O. Box 632	•	Division of C The Centre of	
	Tallahassee,			roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 AUG 17 All 9: 15

SATO TRADE CONSULTING, 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 I. Florida document number £14000144093	iability Company	were filed on 09/1:	5/2014	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company hero	<u>:</u> :	
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the des	ignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applie	rable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			<u>.</u>
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	ss here:	address on our rec		e of the new registered
	1756 NW 23RI	D ST STE B		
New Registered Office Address:			a street address	
	MIAMI		Florida 33	142
		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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or removed	l from our records:			
MGR = N AMBR = A	lanager Authorized Member			
<u>Title</u>	Name	Address	2020 AUG 17 AH 9: 15	Type of Action
			<u> </u>	□Add
				□Remove
				Change
				🗆 Add
				□Remove
				□Change
				□Add
		.	·	□Remove
				□Change
				□Add
				□Remove
				□ Change
				🗆 Add
				□Remove
				□Change
				□Add
				□Remove

_____ Change

	2020 AUG 17 AIT 9: 15	
		
		
-		· -

_		
_		-
`an effec <u>inte:</u> If	ve date, if other than the date of filing:	
record d is file	specifies a delayed effective date, but not an effective time, at 12:01 arm on the earlier of: (b) The 90th ed.	day after the
Pated _	JULY 27TH, 2020	
	Signature of a member or authorized representative of a member	
	RICARDO T. SATO	

Filing Fee: \$25.00