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COVER LETTER

	, Registration Se Division of Cor			
//////////////////////////////////////	Arius USA	LLC .		
SUBJEC	1:	Name of Lin	nited Liability Company	
	•			
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Maria C Sousa		
			Name of Person	
		Sousa & Associates INC		
		·	Firm/Company	
		5728 Major BLVD Ste 309	9	
		 	Address	-
		Orlando Florida 32819		
			City/State and Zip Code	.
		documents@sousanassociat		···
			to be used for future annual report no	tification)
For furthe	r information c	oncerning this matter, please c	all:	
Maria C S	Sousa		407 8007028	
	Name of	f Person		ne Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	0 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)
	<u> Tailing Address</u>		Street Address:	action
Registration Section Division of Corporations		Registration Se Division of Co		
t.	P.O. Box 632	7	The Centre of	Tallahassee
]	fallahassee, F	·L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Arius USA LLC			
(Name of the Limit	ed Liability Compar (A Florida Limited L	ny as it now appears on our hability Company)	records.)
he Articles of Organization for this Limited Li lorida document number $\frac{61-1754747}{1}$	iability Company	were filed on 01/16/2015	and assigned
his amendment is submitted to amend the follo	owing:		
a. If amending name, enter the new name o	f the limited liab	ility company here:	
he new name must be distinguishable and contain the v	vords "Limited Liabil		
inter new principal offices address, if applic	able:	2778 Almaton Loop #40	4 - kissimmee Filori 34747
(Principal office address MUST BE A STREET ADDRESS)			3 3 5
Enter new mailing address, if applicable:		12773 Westside Village	Loop - Winderincre Florida 34786
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ess_here:	address on our records.	enter the name of the new regist
Name of New Registered Agent:	Maria C Sousa		
New Registered Office Address:	5728 Major BI	t address	
	Orlando, FL		Florida 32819
		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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
 -			
			□Remove
			□Change
			□ Add
			Change
			□Add
			□Remove
			□Change
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record d is fil		red effective date, b	ut not an effect	tive time, at 1	2:01 a.m. on	the earlier of:	(b) The 900	h day a	fter the
Dated .	Septimber	2,25		La	- 2020,				
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