**2**0001/0005

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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EAGLE TAX REPRESENTATION, CORP.

Account Number: I20070000037

: (954)532-3842 Phone Fax Number : (954)532-3847

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

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## **COVER LETTER**

	Registration Se Division of Co			
SUBJEC	ACB\$ HO	LDING & INVESTMENTS L	LC	
SOLUEC	,1.	Name of Lin	nited Liability Company	Daytime Telephone Number  2 S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  T/COURIER ADDRESS; tion Section of Corporations
The encio	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		Alexandre Cardoso Barrei	ro Sa	
			Name of Person	
		Eagle Tax Representation,	, Согр	
			Firm/Company	
		5493 Wiles Road Suite 10	5	
			Address	
		Coconut Creek, FL - 3307	3	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		paulo@eagle-tax.com	to be used for future annual report not	faution
For furthe	r information o	oncerning this matter, please c		nearon
Paulo (	Oliveirs, EA		954 532-3842	
	Name o	l'Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.00	0 Filing Fcc	□ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 assec, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim		any as it now appears on our Liability Company)	records.)					
The Articles of Organization for this Limited Liability Company were filed on 02/13/2015  Florida document number L15000027703					and assigned			
This amendment is submitted to amend the fol	lowing:							
A. If amending name, enter the new name o	of the limited liah	ility company here:						
The new name must be distinguishable and contain the	words "Limited Liubi	lity Company," the designation	"LLC" or t	he shbreviati	oo "L.L.C."			
		3301 Boynton Beach Blv						
		Boynton Beach, FL - 33-	136					
		_		2,. 12	S			
Enter new mailing address, if applicable:		8646 Lewis River Road		7 T T TOTAL	ि () ()			
ter new name must be distinguishable and contain the words "Limited Later new principal offices address, if applicable: rincipal office address MUST BE A STREET ADDRESS after new mailing address, if applicable: rincipal address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered agent and/or the new registered office address.	BOX)	Delray Beach, FL - 3344	6	-, -,	<u>. D</u>			
			cords, <u>en</u>	ter the n	op No nme of the			
Name of New Registered Agent:	Eagle Tax Representation, Corp				<b></b>			
New Registered Office Address:	5493 Wiles Ro	ad - Suite 105						
		Enter Florida street	address		<u></u>			
	Coconut Creek		_, Florida		<u></u>			
		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

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09/23/2015 11:30AM FAX Ø 0004/0005

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 = M $AMBR = A$	lanuger .uthorized Member		
Title	Name	Address	Type of Action
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			□ Remove
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		A 44.	9/23/2015		<b> </b>	- N		
ll'an effective date is	f other than the date s listed, the date must be sp	secific and canno	t be prior to date	of filing or more than	option 90 days after fi	ing.) Pursu	unt to 605.	.0207
Note: If the date document's effec	inserted in this block d tive date on the Departi	oes not meet th ment of State's	e applicable sta records.	tutory filing requi	rements, this o	ate Will n	ol be liste	:d as
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