Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JP GLOBAL BUSINESS

Account Number : I20130000083

Phone

: (305)436-0093

Fax Number

: (305)436-0094

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

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TEIXEIRA & TOFFOLI, LLC

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Page Count	05
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08/10/2015 10:57 1 TO:18506176383 FROM:7862171243

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### **COVER LETTER**

10:	Division of Cor			
SHRII	ECT:		EVEDO IMOVEIS LLC	
00101		Name of Lim	ned Liability Company	
The en	aclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	indence concerning this matter	to the following:	
			JOSE PEREZ	
		و ها شاهای همید در	Name of Person	
		JP GLO	BAL BUSINESS SOLUTIONS, IN	c
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Firm/Company	<del>- :</del>
		139	5 BRICKELL AVE STE 800	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address	والمستودة والمست
			MIAMI, FL 33131	
			City/State and Zip Code	
			brickell@jpgbusiness.com	
Y C			to be used for future annual report notil	ncarion ;
roi iui		oncerning this matter, please ca		
		PEREZ	at ()	
	Name o	f Person	Area Code Daytimo	: Telephone Number
Enclos	sed is a check for t	he following amount:		
	5.00 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)

MAHLING 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

08/10/2015 10

10:57

## TO: 18506176383 FROM: 7862171243 ARTICLES OF AMENDMENT

# TO ARTICLES OF ORGANIZATION OF

H13880192739 3

TEIXEIRA & TOFFOLI, LLC			
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company were filed on	06/17/2015	and assigne	d
Florida document number 1.15000105768			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company her	re:		
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	esignation "LLC" or the al	obreviation "L.(,,C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
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Posterior and and if another black		15 TE	
Enter new mailing address, if applicable:	<u> </u>	>2 <b>E</b>	~~ ~ ~ ~ ~
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	i j
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		m or ≥=	. Ti
B. If amending the registered agent and/or registered office address on	our records, enter	the name of t	he ne
registered agent and/or the new registered office address here:	•	O	l <sub>ancen</sub> f
		25 S	
Name of New Registered Agent		7.5	
New Registered Office Address:			
	ida street address		
	, Florida		····
( in		7in 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

08/10/2015 10:57 TO:18506176383 FROM:7862171243 Page: 4

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

+1/50001927393

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	RICARDO SANTIAGO TEIXEIRA	1395 BRICKELL AVE STE 800	
		MIAMI, Fl. 33131	□ Remove
			☐ Change
MGR	JOSE A. TOFFOLI FILHO	1395 BRICKELI. AVE STE 800	Add
		MIAMI, FL 33131	☐ Remove
			☐ Change
			Remove
			LONIASSEE, FLORIDA
			Change
			Add
			☐ Remove
			Change
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			☐ Remove
			Change.

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,		STREET,
E Effect	tive date, if other than the date of filing:	
(If an ef <b>Note:</b>	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records	207 (3)(t as the
If the re (b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier a 90th day after the record is filed.	of:
Dated	AUGUST 10th 2015	
2000		
	Tamber 1	