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.

(((H19000341336 3)))



H190003413363ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)

: (850)617-6383

From:

Account Name : VIR ACCOUNTING & BUSINESS CONSULTING , LUCE

Phone + 1 +954)228-2410

Fax Number : (954) 230 0411

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

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

***State of the email of Cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for this business entity to be used for future annual report of the cess for the cess

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BOSSA CONCEPT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M JAH 28 PH 3:

Electronic Filing Menu

Corporate Filing Menu

1 SULKEP 2020

(((H190003413363)))

To: Amendment FL

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOSSA CONCEPT, LLC		
(Name of the Limi	ted Liability Company as it now appears o (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited L Florida document number L15000188025	iability Company were filed on 11/05	and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company here	ž
The new name must be distinguishable and contain the	words "Limited Liability Company," the desi	gnation "LLC" or the abbreviation "LL.C."
Enter new principal offices address, if applie	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	2019 NO
B. If amending the registered agent and registered agent and/or the new registered of	/or registered office address on o	our records, enter the name2of the new
Name of New Registered Agent:	MARCOS MIRANDA	
New Registered Office Address:	6499 POWERLINE RD., SUITE 10 Enter Florida	1 • street øddress
	FORT LAUDERDALE, FL	, Florida ³³³⁰⁹
	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

		,	
rom:	Cleber Dut	ra	

Indeer Dutra 'Felx: 19542282410 To: Amendment FL Fax: (850) 617-6383 Page: 5 of 6 01/28/2020 3:22 PM (H1YUUUJ41330 3))

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
MGR	THAIS TOMBOLATO BOUCAS	125 PALOMA DR., CORAL GABLES, FL 33143	■ Add
			🗆 Removo
			Change
MGR	DAIANE KOCHENBORGER PEDROSO DE REZENDE	1201 20TH ST., MIAMI BEACH, FL 33139	□ Add
			= Remove
			Change
MGR	NATHALYA RACHEL D'ELIA BENEVIDES	250 S. ISLAND BEACH BLVD, APT 606, SJSLES BCH, FL.	
			Remove
			🗀 Change
	·		
			□ Remove
			Change
			☐ Remove
			☐ Change
			
			Remove
			Change

(((H	19	00	03	41	33	6	3))	
---	---	---	---	----	----	----	----	----	---	---	---	---	--

·	
<u> </u>	
<u></u>	
ective date, if other than the dat	te of filing: (optional) specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.1
te: If the date inserted in this block	does not meet the applicable statutory filing requirements, this date will not be fister
ument's effective date on the Depar	rument of State's records.
عد المصادم معنقات مسالما المصادر	ffective date, but not an effective time, at 12:01 a.m. on the earlie
record specifies a delayed en he 90th day after the record	I is filed.
•	
ed	2019
·	
Cio	mature of amember or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00