Division of Corporations **Electronic Filing Cover Sheet**

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.

(((H21000441486 3)))



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)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAKE INVEST, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

DEC 06 2021 A LUNT

Electronic Filing Menu Corporate Filing Menu

Help

TO:

Registration Section

From: RUBEM SOUZA

COVER LETTER

Division of Co	rporations		
LAKEIN	VEST, LLC		
SUBJECT:	Name of Lim	ited Liability Company	.
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Trease retain an corresp.	onderice concorning this matter	in the following.	
	Rubem Souza		
		Name of Person	
	MEDEIROS SOUZA COF	Name of Limited Liability Company nent and fee(s) are submitted for filing. concerning this matter to the following: Image: Souza	
	<u> </u>	Firm/Company	
	845 N GARLAND AVE. S	STE 100	
	·	Address	
	ORLANDO, FL 32801		
		City/State and Zip Code	
	contact@medeirossouza.com		lontion l
Continue information	·	·	Kareny
	concerning this matter, picase of		
Rubem Souza		407 326-8484 at ()	
Name (of Person	Area Code Daytine	Telephone Number
Enclosed is a check for t	the following amount:		
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
<u>MajlingAddre</u> Registration		StreetAddress: Registration Sec	tion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Page: 5 of 7

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAKE INVEST, LLC		E ACT
(Name of the Limi	ited Liability Company as it now appea (A Florida Limited Liability Company)	non our records.)
The Articles of Organization for this Limited I	iability Company were filed on	11/13/2015 and assisted 3/4
Florida document number	·	
This amendment is submitted to amend the fol	lowing:	-
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
The new name must be distinguishable and contain the	words "Limited Liability Company," the c	lesignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applied	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or agent and/or the new registered office address		ecords, enter the name of the new registers
Name of New Registered Agent:	MEDEIROS SOUZA CORP	
New Registered Office Address:	845 N GARLAND AVE, STE 10	00
	Enter Flo	rida street address
	ORLANDO	Florida 32801
	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.

To: +18506176383 Page: 6 of 7

2021-12-03 16:00:59 GMT

14076046519

From: RUBEM SOUZA

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	P DE CARVALHO, ANTONIO F	9145 Narcoossee Rd Ste 208	□Add
		Orlando, Fl. 32827	
			□ Change
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
		<u></u>	
			□Remove
			Change
			□Add
			Пкетюче

Page: 7 of 7

				2021 DEC - 3
	· · · · · · · · · · · · · · · · · · ·			
				(
			<u> </u>	AN io
			······	
	<u> </u>			
<u> </u>				
		•		
ffective date, if other than the data an effective date is listed, the date must be Note: If the date inserted in this block locument's effective date on the Department.	specific and cannot be prior does not meet the applic	no date of filing or more cable statutory filing r	(optional) than 90 days after filing.) Po equirements, this date wi	arsuant to 605.0207 If not be listed as:
record specifies a delayed effective da d is filed	ite, but not an effective t	ime, at 12:01 a.m. on	the earlier of (b) The S	Oth day after the
	12,04,2021			
ORLANDO Dated		·		
Dated ORLANDO	nature of a member or auth	<u> </u>		