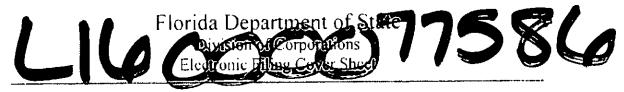
From: EXPAT CONSULTING



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.

(((H22000025062 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPAT CONSULTING CORP.

Account Number : I20190000096 : (407)745-1112 Phone : (407)641-8083 Fax Number

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

Email Address: ACC@EXPATCONSULTING.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IBC FLORIDA INVESTMENTS AND BUSINESS CONSULTING LLC

Certificate of Status	0
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Page Count	06
Estimated Charge	\$25.00

From: EXPAT CONSULTING

COVER LETTER

TO: Registration : Division of Co			F
	RIDA INVESTMENTS AND BU	USINESS CONSULTING LLC	
SUBJECT:	Nume of Limi	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondences	pondence concerning this matter	to the following:	
	NILTON FREGNI		
	-	Name of Person	
	EXPAT CONSULTING C	ORP	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	8615 COMMODITY CIR.	ST 11	
		Address	· · · · · · · · · · · · · · · · · · ·
	ORLANDO - FL 32819		
		City/State and Zip Code	
	ACC@EXPATCONSULTI	NG.COM to be used for future annual report to	atification)
For further information	concerning this matter, please co		311(Cate 91)
NILTON FREGNI	•	407 745.1112 at ()	
Name	of Person	Area Code Dayt	ine Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Fifing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MailingAddress: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

StreetAddress: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

IBC FLORIDA INVESTMENTS AND BUSINESS CONSULTING LLC

If Changing Registered Agent, Signature of New Registered Agent

From: EXPAT CONSULTING

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Company as it now appears on our Florida Limited Liability Company)	records) > R
	Plotted Chilled Chaomy Company	S 2
The Articles of Organization for this Limited Liab	pility Company were filed on 04/19/2016	Tandassigned
Florida document number L16000077586		
- Karda document manuscr	 :	
This amendment is submitted to amend the follow	ring:	— — — — — — — — — — — — — — — — — — —
		المارية 6: 2
A. If amending name, enter the new name of the	he limited liability company here:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
The new name must be distinguishable and contain the work	ds "Limited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.		
(Principal office address MOST BE A STREET	<u> </u>	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	9X)	
B. If amending the registered agent and/or reg	ristered office address on our records	enter the name of the new registered
agent and/or the new registered office address		enter the heart of the heart eggineration
N. CN. D. Paris 14 and		
Name of New Registered Agent:		
New Registered Office Address:		
•	Enter Florida street	address
		Floridu
	City	, Floridu Zip Code
New Registered Agent's Signature, if changing Rep	gistered Agent:	
		. I further sures to county with the
I hereby accept the appointment as registered of provisions of all statutes relative to the proper	agent and agree to act in this capacit and complete performance of my dut	y. 1 juriner tigree to Comply with the ies, and I am familiar with and
accept the obligations of my position as registe	ered agent as provided for in Chapter	605, F.S. Or, if this document is
being filed to merely reflect a change in the re-	gistered office address. I hereby confi	irm that the limited liability
company has been notified in writing of this ch		

To: +18506176383 * Page: 7 of 8 2022-01-19 20:26:26 GMT 14076418083 From: EXPAT CONSULTING

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
AMBR	M.SANTINO, VICTOR GABRIEL		□Add
			■Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□ Change
			□Remove
			☐ Change
			□Add
			Remove
			□Change

Page: 8 of 8

We	would	Lille	τО	Rem	ove	The	member
San	tino, Vi	CTOR	Gab	Riel	MA	IIA	
			-				
				······································			
an effective date is lote: If the date is	other than the dat listed, the date must be nserted in this block we date on the Depar	specific and can does not meet	not be prior to the applicab	date of filing of	or more than tilling require	(options 00 days after fili ements, this da	il) ng.) Pursuant to 605.020 te will not be listed a
e record sp e ci The 90th day	fies a delayed ef after the record	fective date is filed.	, but not	an effectiv	e time, a	t 12:01 a.m	a. on the earlier (
aled <u>OV</u>	19/2022) : : :		. ·			
Д		nature of a mem	ber or author	zed representa	tive of a mer	nher	

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