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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: contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CREATIVE SPEAR, LLC

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Registration Section

Tallahassee, FL 32314

TO:

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

From: RUBEM SOUZA

COVER LETTER

Division of 0	Corporations				
	TIVE SPEAR, LLC				
SUBJECT:Name of Limited Liability Company					
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.			
	spondence concerning this matter				
Trease rought an earle	sporterior Extracting this matter	www.			
	Rubem Souza				
		Name of Person			
	Medeiros Souza corp				
		Firm/Company			
	1711 Amazing Way, Ste 2	13			
		Address			
	Ocace, FL 34761				
		City/State and Zip Code			
	contact(वे)medeirossouza,co				
		to be used for future annual report not	ification)		
For further informatic	on concerning this matter, please c	all:			
Rubem Souza		407 326 - 8484 at ()			
Nan	ne of Person	Area Code Daytin	e Telephone Number		
Enclosed is a check for	or the following amount:				
■ \$25.00 Filing Fee	: □ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
<u>MailineAdd</u>		StreetAddress:			
Registration Section Division of Corporations		Registration Se			
P.O. Box 6327			Division of Corporations The Centre of Tallahassee		

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim			_
(Name of the Lini	ited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)	.
The Articles of Organization for this Limited I	Liability Company were filed on 04/20/	2016	and assigned
Florida document number L16000077783	·		
This amendment is submitted to amend the fol	lowing:		
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 design	nation "LLC" or the abbr	eviation "L.IC."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	···-	
Enter new mailing address, if applicable:			
.,	<u></u>		
.,	E BOX)		
.,	E BOX)	ن	
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or	registered office address on our reco		of the new registe
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or	registered office address on our reco		of the new registe
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or agent and/or the new registered office address	registered office address on our reco		of the new registe
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or the new registered office address and/or the new Registered Agent:	registered office address on our recoress here:		of the new registe : نر
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address	registered office address on our recoress here: MEDEIROS SOUZA CORP	rds, <u>enter the name</u>	of the new register
	registered office address on our recoress here: MEDEIROS SOUZA CORP 1711 Amazing Way, Ste 213	rds, <u>enter the name</u>	of the new register

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

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

Title	Name	Address	Type of Action
AR,MGR	ALVES DE ARAUJO JR, EDSON	5133 CITRUS LEAF BLVD	□Add
		WINTER GARDEN, FL 34787	□Remove
			■Change
AMBR	Golden Arch Enterprises Corp	1711 AMAZING WAY STE 213	≘ Add
		OCOEE, FL 34761	□Remove
			☐ Change
MRGM	Morena da Silva Alves De <u>Araujo, Daniella</u>	-	□Add
			■Remove
			□Change
			Remove
			□Change
			Add
			□Remove
			Change
			
			Remove
			□ Chan

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From: RUBEM SOUZA

. . . Page: 7 of 7

To:

Typed or printed name of signee