116000105175

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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D. SCOTT NOV 1 0 2016

COVER LETTER

Division of Cor CONROY	LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	Ţ.	
	JOYCE NASCIMENTO		
		Name of Person	
		Firm/Company	
	7411 VICTORIA CIR		
		Address	
	ORLANDO, FL 32835		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please co	atl:	
Name c	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 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)

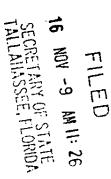
MAILING ADDRESS:

TO:

Registration Section

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



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONROY LLC			
(Name of the Limit	ted Liability Compa (A Florida Limited	ny as it now appears on our reco Liability Company)	<u>ords.</u>)
The Articles of Organization for this Limited L Florida document number L16000105175	iability Company	were filed on 05/31/2016	and assigned
This amendment is submitted to amend the foll-	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/ registered agent and/or the new registered of			rds, <u>enter the name of the new</u>
Name of New Registered Agent:	DEMIS	RICARDO GUE	DES DE HELD
New Registered Office Address:	5360	Coursy Rd Enter Florida street add	apt 1418 tress Florida 32811
	ort	audo.	Florida 328//

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.

City

If Changing Registered Agent, Signature of New Register CL Agent

Zip Code

Page 1 of 3

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	FABIO B RODRIGUES	5160 CONROY RD APT 1418,	Add
		ORLANDO, FL 32811	■ Remove
			☐ Change
AMBR	ANA PAULA P MARQUES	5160 CONROY RD APT 1418	□ Add
		ORLANDO, FL, 32811	■ Remove
			☐ Change
MGR	FLAVIA DA CUNHA LIMA	5160 CONROY RD APT 1418	Add
		ORLANDO, FL 32811	☐ Remove
			☐ Change
MGR	DEMIS RICARDO GUEDES DE NELO	5160 CONROY RD APT 1418	■ Add
		ORLANDO, FL 32811	Remove
			☐ Change
			☐ Remove
			Change T
			FILED PRINCEST ST. PLOADS
			On Change

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an effecti lote: If t	date, if other than the date of filing:	filing.) Pursuant to 605.020'
	d specifies a delayed effective date, but not an effective time, at 12:01 a lth day after the record is filed.	.m. on the earlier o
ated	13/03/20/6	
	Signature of a member or authorized representative of a member	
	FABIO RODRIGUES Typed or printed name of signee	SECRETA TALLIAHA
	Page 3 of 3	LARY OF
	Filing Fee: \$25.00	