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To:

Page: 1 of 7

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. **

contact@medeirossouza.com

50

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WEEGRON, LLC.

Certificate of Status	1
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JUL 22 2022

COVER LETTER

14076046519

TO: Registration S Division of Co		•	-
WEE	GRON, LLC.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	sondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	•
	MEDEIROS SOUZA COI	राष्ट्र	
		Firm/Company	•
	845 N GARLAND AVE, S	STE 100	
		Address	•
	ORLANDO, FL 32801		
	contact@medeirossouza.co	City/State and Zip Code	•
		to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
Rubem Souza		407 326-8484	
Name	of Person	Area Code Daytime Telephone Number	r
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ite of Status &
MailingAddre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	StreetAddress: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

14076046519

Company as it now appears on or Limited Liability Company)	ir records.)	-	
mpany were filed on11/28/	2016	and assigno	ed
ed liability company here:			
ited Liability Company," the designa	tion "LLC" or the a	abbreviation *L.L.C.	- T.
845 N Garland AV	E, STE 100, O	rlando , FL 328	301
ESS)			
			
845 N Garland AV	/E, STE 100, C	orlando , FL 32	801
· ** -** · · · · · · · · · · · · · · · · ·			
			
office address on our record	s, <u>enter the nar</u>	ne of the new re	gister
845 N Garland AVE, ST	E 100	22	,
EnterFloridastr	et address		
	, Florida _		
·		Zipcola Ci	
and agree to act in this capac implete performance of my d ent as provided for in Chapt	aucs, and Lam er 605, F.S. Or	familiar with a , if this docume	ınd
	mpany were filed on	ed liability company here: 10d Liability Company," the designation "LLC" or the a 845 N Garland AVE, STE 100, Or 845 N Garland AVE, STE 100, Or Medeiros Souza Corp 845 N Garland AVE, STE 100 EnterFloridustreetaddress Orlando City Agent: Indicate and agree to act in this capacity. I further as implete performance of my daties, and I am ent as provided for in Chapter 605, F.S. Or	mpany were filed on

□Change

MGR = Manager

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

AMBR	= Authorized Member		
<u>Title</u>			Type of Action
AMBR	RIBEIRO, SERGIO LUIZ	5901 town bay dr apt 8-34	□Add
		Boca raton 33486	Remove
			UChange
AMBR	FERREIRA RIBEIRO, TATIANE	5901 town bay dr apt 8-34	
		Boca raton 33486	
			[]Change
AMBR	Thäus Holding Corporation 8-	45 N Garland AVE, STE 100, Orlando , F	L 32801
			□Remove
			□Change
			□Add
			□Rensove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove

Page. 7 of 7

Effective date, if other than the date of filing: (optional)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the ord is filed Dated ORLANDO O7/20/2022 Signature of a member or authorized representative of a member.		
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		 ,
Ruben Souza		Signature of a member or authorized representative of a member
	Ruben Souza	