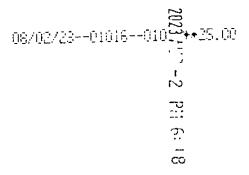
117000005223

(Reques	tor's Name)	
(Address	5)	
(Address	5)	
(Cir. (Cir.	10 /Db 000	<u></u>
(City/Sta	te/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busines	s Entity Name	e)
(Docume	ent Number)	
Certified Copies	Certificates of	of Status
Special Instructions to Filing	Officer:	





600413165676



8.707 T.N 7.3 10 2.3

COVER LETTER

SUBJECT:			ited Liability Company	
The enclosed Ar	ticles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all	correspon	dence concerning this matter	to the following:	
		RICARDO RECHE DE C	ARVALHO	
			Name of Limited Liability Company Iment and fee(s) are submitted for filing. c concerning this matter to the following: CARDO RECHE DE CARVALHO Name of Person ECHE LLC Finn/Company 831 EMERSONDALE AVE Address INDERMERE, FL 34786 City/State and Zip Code ne@reche.com E-mail address: (to be used for future annual report notification) ing this matter, please call: ALHO Area Code Daytime Telephone Number Dayting Fee & Certificate of Status & Certificate Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
		CHE LLC Name of Limited Liability Company icles of Amendment and fee(s) are submitted for filing. Forrespondence concerning this matter to the following: RICARDO RECHE DE CARVALHO Name of Person RECHE LLC Finn/Company 12831 EMERSONDALE AVE Address WINDERMERE, FL 34786 City/State and Zip Code reche@rreche.com E-mail address: (to be used for future annual report notification) nation concerning this matter, please call: HE DE CARVALHO Name of Person Area Code Daytime Telephone Number ck for the following amount: Fee \$\Begin{small } \$30.00 \text{ Filing Fee & Certificate of Status} \text{ Certificate of Status & Certified Copy (additional copy is enclosed)} \text{ Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)} \text{ Address: Registration Section Division of Corporations and Corporations The Centre of Tallahassee}		
	Name of Limited Liability Company If Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: RICARDO RECHE DE CARVALHO			
		-	Address	
		WINDERMERE, FL 3478	6	
			City/State and Zip Code	
		_		
				fication)
For further infor	mation co	ncerning this matter, please ca	all:	
RICARDO REG	CHE DE C	CARVALHO		
	Name of	Person		e Telephone Number
Enclosed is a ch	eck for the	e following amount:		
■ \$25.00 Filin	ıg Fec		Certified Copy	Certificate of Status & Certified Copy
			· · · · · · · · · · · · · · · · · · ·	ction
_				
ranan	iassee, r	L 32314	∠410 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RECHE LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{01/06/2017}{2}$ and assigned Florida document number <u>L17000005223</u> 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida __

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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	FABIANE DA SILVA	12831 EMERSONDALE AVE	□Add
		WINDERMERE, FL 34786	■Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
•_			□Remove
:			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
•			□Change
			DAdd
			□Remove
			□Change

			
		<u> </u>	
······			
			<u>.</u>
			
		 -	12
			
		<u> </u>	<u>्</u>
			G
			
	-		
fective date, if other than the in effective date is listed, the date mu ote: If the date inserted in this b becument's effective date on the E	st be specific and cannot be prior to date of f ock does not meet the applicable statut	(optional) filing or more than 90 days after filing.) F tory filing requirements, this date w	ursuant to 605.020
ecord specifies a delayed effectivistics is filed.	re date, but not an effective time, at 12:	:01 a.m. on the earlier of: (b) The	90th day after the
ited July, 14th	. 2023		
J.	Wraue Al Signature of a member or authorized repre	C.	
-	Signature of a member or authorized repre	esentative of a member	