117000069842

(Req	uestor's Name)	
(Add	ress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	ilina Officer:	
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Office Use Only



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THE CU 2022 JUN -7 PH 12: 52 SEVENTE SERVICES

COVER LETTER

eronece.	SAKAMOTO) CONSTRUCTION COMPAR	NY. LLC	
SUBJECT:		Name of Limite	d Liability Company	
The enclosed	FArticles of A	mendment and fee(s) are subm	itted for filing.	
Please return	all correspond	dence concerning this matter to	the following:	
		MATHEUS SAKAMOTO		
			Name of Person	 _
		SAKAMOTO CONSTRUC	HON COMPANY, LLC	
			Firm/Company	
		1060 ALSTON BAY BLVD	,	
			Address	
		Orlando, Florida 32703		
			City/State and Zip Code	-
		sakamoto_construction@hoti		
		E-mail address: (to	be used for future annual report t	otification)
For further i	nformation co	ncerning this matter, please call	1:	
Matheus Sa	kamoto		407 8663303	
	Name of	Person	Area Code Day	time Telephone Number
Enclosed is	a check for the	: following amount:		
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

FILED

2022 JUN -7 PM 12: 52

SAKAMOTO CONSTRUCTION COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TALLAHASSEE, FI

The Articles of Organization for this Limited Lia	bility Company were filed on 03/28/2017	and assigned
Florida document number L17000069842	·	
This amendment is submitted to amend the follow	xing:	
A. If amending name, enter the new name of t	the limited liability company here:	
N/A		
The new name must be distinguishable and contain the wor	rds "Linuted Liability Company." the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	1.45551200	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Box) B. If amending the registered agent and/or registered agent and/or the new registered office.	r registered office address on our records,	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	Zip Code

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Felipe Gouveia de Oliveira	1060 Alston Bay Blvd, Apopka FU	■ Add
			Remove
			Change
AMBR	Ayrton Cardoso Alberti	1060 Alston Bay Blvd, Apopka FL	⊟ Add
			■ Remove
			□ Remove
			Change
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E. Effect	ive date, if ot	her than the d	late of filing	June 1st, 20.		(optional)		
(If an eff Note:	fective date is list If the date ins	ed, the date must be creed in this bloc	be specific and ck does not m	cannot be prior to seet the applica	o date of filing or ble statutory fil	more than 90 days ling requirements	after filing.) I c this date w	ursuant to 605 ill not be list	i 020 ed a
docum	ent's effective	date on the Dep	nartment of S	tate's records.	·	- '			
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Dated	June 1st			2022	/	11			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00