LIBOOOGIGTI

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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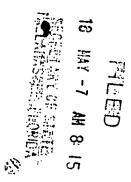


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COVER LETTER

TO:	Registration Se Division of Cor		efet.	
SUBJE	WWW CAI	PITAL LLC		
SOBJE	CI	Name of Limi	ted Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		ANA L FERREIRA	·	
			Name of Person	
		ANAS ACCOUNTING SI	ERVICES CORPORATION	
			Firm/Company	
		100 WALLACE AVE ST	≣ 245	
			Address	
		SARASOTA, FL 34237		
			City/State and Zip Code	
		ANA@ANASACCOUNTI		
For first	har information o	E-mail address: (to be used for future annual report notificall.	cation)
		oncerning this matter, prease of		
ANA L	FERREIRA		941 870-3400 at ()	
	Name o	of Person	Area Code Daytime	Telephone Number
Enclose	ed 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:

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

WWW CAPITAL 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 Liabil	lity Company were filed on 03/08/2018	and assigned y
Florida document number L18000061671	.	
This amendment is submitted to amend the following		6 7 1 1
A. If amending name, enter the new name of the		
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	<u> </u>	8
(Principal office address MUST BE A STREET A	DDRESS)	in the second se
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 Name of New Registered Agent: New Registered Office Address:	registered office address on our reco	
_	City	Florida Zip Code
New Desistened Assetts St.		Zıp Code
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper as accept the obligations of my position as registered being filed to merely reflect a change in the regis	nd complete performance of my duties ed agent as provided for in Chapter 60	, and I am familiar with and 05, F.S. Or, if this document is

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
MGRM	ORMUS LTD	Wickhams Cay, Po Box 662 Road Town	⊞ Add
		Citco Building Tortola, British Virgin Isk	
			Change
MGRM	MARCELO KARVELIS FRANCO	1155 N Gulfstream Ave Ste 1201 Savasofa, FL 34236	🗖 Add
			■ Remove
			Change
MGRM	CLLT International Ltd	Nerine Chambers Po Box 905 Pd +owy	■ Add
		Tortola, British Virgin Ishno	□ Remove
			Change
			□ Add ☐
		(6) () ()	Bernove
			√ Change
			
			□ Remove
			Change
			🗆 Add
			Remove
			Change

FABIANO DE BRIDA 33.34%	
ORMUS LTD 33.33%	
CLLT INTERNATIONAL LTD 33.33%	•
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	W C
	5.75
	R. Control of the Con
effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to the date inserted in this block does not meet the applical ument's effective date on the Department of State's records.	odate of filing or more than 90 days after filing.) Pursuant to 605 ble statutory filing requirements, this date will not be listed
record specifies a delayed effective date, but not he 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlie
04/27/2018	
····	_·

D.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00