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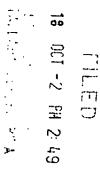
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Sec Division of Corp			
		E EXPORT & IMPORT LLC	•	
SUBJI	ECT:	Name of Limi	ted Liability Company	
The en	iclosed Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please	return all correspoi	ndence concerning this matter t	to the following:	
		FABIANA DE BARROS		
			Name of Person	
		LEGIT CONSULTING SE	RVICES, LLC	
			Firm/Company	
		6200 METROWEST BLVI	D UNIT 201-D	
			Address	
		ORLANDO-FL, 32835		
		INFO@LEGITCS.COM	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notific	ation)
For fu	rther information co	oncerning this matter, please ca	ill:	
FABL	ANA DE BARROS		407 2852290 at ()	
	Name of	Person Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
■ \$2	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:

:OT

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

ited Liability Comp (A Florida Limited	any as it now appears on our re- Liability Company)	cords.)
Liability Company	y were filed on 03/30/2018	and assigned
lowing:		
of the limited lial	bility company here:	
words "Limited Liab	ility Company," the designation "	LLC" or the abbreviation "L.L.C."
cable:	N/A	
ET ADDRESS)		
		3. 3 =:
	N/A	2 17
. 800		2 3
Mailing address MAY BE A POST OFFICE BOX)		- 7
Vor registered o	Mice address on our root	r ands anter the name of the
		rus, enter the name of the
LEGIT CONS	ULTING SERVICES, LLC	
6200 METRO	WEST BLVD UNIT 201-D	
	Enter Florida street ad	dress
ORLANDO		Florida 32835
	lowing: of the limited liab words "Limited Liab cable: ET ADDRESS) Jor registered office address her LEGIT CONS 6200 METRO	Ited Liability Company as it now appears on our received (A Florida Limited Liability Company) Liability Company were filed on 03/30/2018 lowing: Ited Liability Company bere (100 on 03/30/2018) Item Liability Company here: Words "Limited Liability Company," the designation " N/A ET ADDRESS) N/A N/A N/A LEGIT CONSULTING SERVICES, LLC 6200 METROWEST BLVD UNIT 201-D Enter Florida street ad

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

Zip Code

Page 1 of 3

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			☐ Change
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			Remove
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ective date, if other than the date effective date is listed, the date must be sp	of filing:	ior to date of filing	or more than 90 days at	otional)	muant to 605 01
e: If the date inserted in this block do	des not meet the app	licable statutory:	filing requirements, t	his date will	not be listed
ument's effective date on the Departn	nent of State's recor	ds.			
record specifies a delayed effe	active date but	not an official	ia tima int 13:01		tha andia-
he 90th day after the record is	s filed.	not an enectiv	e tille, at 12:01	t a.m. on	the earlier
SEPTEMBER 26TH	2018	·			
	. /				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00