L18000087672

(Requestor's Name)
(Address)
` ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
0.45.40.5
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
-F

Office Use Only



900354996249

11/20/20--01009--003 **25.00

FILED 5H 3: 41

12/23/20 5/-1

COVER LETTER

TO:	Registration Se Division of Cor			
	Neto Floor	Removal LLC		
SUBJE	CT:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Izi Pinho		
			Name of Person	
		Pinho Law, PLLC		
			Firm/Company	
		6965 Piazza Grande Ave, S	Suite 315	
			Address	
		Orlando, FL 32835		
		izi@pinholaw.com	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report noti	fication)
For furth	ner information c	oncerning this matter, please ca	all:	
lzi Pinh	O		321 209-8282	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed	d is a check for the	he 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 (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NETO FLOOR REMOVALTIC			
(<u>Name of the Lim</u> i	ited Liability Comp. (A Florida Limited	any as it now appears on (Liability Company)	our records.)
The Articles of Organization for this Limited L Clorida document number	Liability Company	y were filed on	018 and assigned
his amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	bility company here:	
he new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	N/A	· <u> </u>
Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or gent and/or the new registered office addrese.	registered office	N/A address on our record	Is, enter the name of the new region
Name of New Registered Agent:	DOMINIUM (CONSULTING SERVIC	ES
New Registered Office Address:	6965 PIAZZA	GRANDE AVE, SUITE	206
	ORLANDO	Enter Florida sti	32835
		City	, Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

NUTTO CLOOD DENOVAL LLO

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>	Name	Address	Type of Action
MGR	FÁBIO JOSE DIAS GASTALDI	RUA CAIUBÍ, 1422, APTO 111, São Paulo - BR	
			= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ⅆ
			□ Add □
			20 Change
			Di Change ⇔ F□Add
			□Remove
			Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□ Changa

	· · · · · · · · · · · · · · · · · · ·						
		<u>. </u>					
	_						
							
						2020	
						ZO NOV	
18118.00			. <u> </u>		::	. 20	= 1
		 -					111
						— ∷	
					. •	\ 7- :-	
fective date, if other than the da	ate of filing:				(optional)		
n effective date is listed, the date must be tee: If the date inserted in this block	e specific and cannot	be prior to da		nore than 90 day	s after filing.) P		
cument's effective date on the Depa							
ecord specifies a delayed effective of is filed.	date, but not an effe	ctive time,	at 12:01 a.m.	on the earlier	of: (b) The 9	∙0th day a	ifter th
October 29	2020)					
Si			1.				