From: RUBEM SOUZA

Division of Corporations **Electronic Filing Cover Sheet**

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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BDN INVESTMENTS USA LLC

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Help

TO:

Registration Section

COVER LETTER

Division of Cor	porations		
	STMENTS USA LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	. Walte Cl. 1911	,	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	
	MEDEIROS SOUZA COF	γp	
		Firm/Company	
		rimecompany	
	845 N GARLAND AVE, S	STE 100	
		Address	
	ORLANDO, FL 32801		
		City/State and Zip Code	
	contact@medeirossouza.com	•	
		to be used for future annual repo	rt notification)
For further information of	concerning this matter, please e	all:	
	•	407 326-84	¢.
Rubem Souza			Daytime Telephone Number
Name o	of Person	Area Code - U	Jaytime Telephone Number
Enclosed is a check for t	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)
MailingAdd		<u>StreetAddre</u>	·c<.
<u>MailingAddres</u> Registration	Section	Registratio	
Division of C			f Corporations

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

If Changing Registered Agent, Signature of New Registered Agent

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BDN INVESTMENTS USA LLC				
(Name of the Limited (A	Liability Compa Florida Limited	ny a <u>y it now appea</u> Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liab Florida document number 1.18000160069 This amendment is submitted to amend the follow A. If amending name, enter the new name of the submitted to a	ility Company ing:	were filed on	07/02/2018	and assigned in the state of th
The new name must be distinguishable and contain the word	ls "Limited Liabi	lity Company," the	designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicab	le:	1540 Internatio	nal Pkwy, Group 2000, sui	te 233.
(Principal office address MUST BE A STREET.		Lake Mary, FL	32746	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office	Lake Mary, FL		
Name of New Registered Agent:	MEDEROS S	OCZA CORP		
New Registered Office Address:	845 N GARLA	ND AVE, STE 10		
	ORLANDO	Emer P.C	rida street address	0.1
	OKLANDO	City	Florida	Zip Code
New Registered Agent's Signature, if changing Registered appointment as registered approvisions of all statutes relative to the proper	agent and agr and complete	ee to act in this performance o	f my duties, and I om fo	miliar with and
accept the obligations of my position as registe being filed to merely reflect a change in the re- company has been notified in writing of this ch	gistered office	address, I here	by confirm that the lim	ited liability

14076046519

From: RUBEM SOUZA

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

Title	<u>Name</u>	Address	Type of Action
			□Add
			Петюvе
			☐ Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□Add
			□Remove
			□Change
			
			□Remove
			Change
			□Add
			Remove
			□ Change

From: RUBEM SOUZA

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Tective date, if other than the da an effective date is listed, the date must be	te of filing:	orior to date of filing o	(op or more than 90 days af	tional) ler filing.) Pursuant to 605.02
ote: If the date inserted in this block ocument's effective date on the Depa	does not meet the ap	plicable statutory f	iling requirements, t	his date will not be listed:
sentient serieetive date on the Depa	ittlient of State 3 rect			
record specifies a delayed effective d	ite, but not an effecti	ve time, at 12:01 a	m on the earlier of	(b) The 90th day after th
ated ORLANDO	12.04.2	021		
				
Sii	nature of a member or	authorized representa	tive of a member	