

LIS CC 216 397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400336802614

11/12/19--01026--002 **25.00

FILED
STATE
DIVISION OF CORPORATIONS
19 NOV 12 PM 4:28

DEC 10 2019
C McNAIR

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: CEPB INTERNATIONAL LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FABIANA ROCHA DE PAULA BARROS

Name of Person

HARTMANN & ASSOCIATES LLC

Firm/Company

7814, PINE HAVEN COURT

Address

ORLANDO , FLORIDA 32819

City/State and Zip Code

ADMIN@HARTMANNACC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROSELAINIE HARTMANN

407 8813602
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

FILED
DIVISION OF CORPORATIONS
19 NOV 12 PM 4:28

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CEPB INTERNATIONAL, LLC

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

FILED
DIVISION OF STATE
CORPORATIONS
19 NOV 12 PM 4:28

The Articles of Organization for this Limited Liability Company were filed on 10/28/2019 and assigned
Florida document number L18000216397.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FABIANA ROCHA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

15077, NIGHT HERON DRIVE

WINTER GARDEN, ORLANDO, FL., 34787

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15077, NIGHT HERON DRIVE

WINTER GARDEN, ORLANDO, FL., 34787

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ROSELAINE HARTMANN

New Registered Office Address:

7814, PINE HAVEN COURT

Enter Florida street address

ORLANDO

City

Florida 32819

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>	<u>Type of Action</u>
AMBR	CARLOS EDUARDO DE PAULA BARROS	15077, NIGHT HERON DRIVE - 34787- ORLANDO, FL	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	FABIANA ROCHA DE PAULA BARROS	15077,NIGHT HERON DRIVE- 34787 - ORLANDO, FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(b) The 90th day after the record is filed.

2019

Signature of a member or authorized representative of a member

CARLOS EDUARDO DE PAULA BARROS

Typed or printed name of signee