L19000068028

| (Requestor's Name) |
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| (Address) |
| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Dusiness Entity (Value) |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO:

Registration Section Division of Corporations

| | BAL SERVICES LLC | | · |
|-------------------------------|---|---|---|
| SUBJECT: | Name of Lin | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | JOSE DURAN | | |
| | - | Name of Person | |
| | TAX 123 INC | | |
| | | Firm/Company | |
| | 3050 DYER BLVD, UND | Γ 442 | |
| | | Address | |
| | KISSIMMEE, FLORIDA | 34741 | |
| | | City/State and Zip Code | |
| | INFO@ TAX123INC.COM | | |
| | E-mail address; (| to be used for future annual report not | ification) |
| For further information c | oncerning this matter, please c | all: | |
| JOSE DURAN | | 407 361-5900 | |
| Name of Person | | at () Area Code Daytin | ne l'elephone Number |
| Enclosed is a check for th | ne 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 Addres Registration 5 | Section | <u>Street Address:</u> Registration Se | |
| Division of C P.O. Box 632 | • | Division of Co | |
| Taffahassee, I | | The Centre of T 2415 N. Monro | raffanassee e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WA GLOBAL SERVICES LLC (Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on $\frac{0371172019}{1}$ ____ and assigned Florida document number L19000068028 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "EEC" or the abbreviation "EEC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Ň 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: TAX 123 INC Name of New Registered Agent: 3050 DYER BLVD, UNIT 442 New Registered Office Address: Enter Florida street address

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.

KISSIMMEE

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 |
|--------------|--------------------------------|----------------------------------|----------------|
| MGR | Marcus V. Araujo R. Dos Santos | 2173 LAKE DEBRA DRIVE, UNIT 0625 | ≡ Add |
| | | ORLANDO, FLORIDA 32835 | □Remove |
| | | | □Change |
| | | | □Add |
| | | | TRemove |
| | | | □Change |
| | | IALL AHA | 200 H |
| | | ASSEE 17 | Remove |
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| AND WOULD LIKE TO ADD I | T TO THE FILING INFORM | ATION WITH THE DIVIS | ION OF |
|---|-----------------------------------|---|---|
| CORPORATIONS SO IT CAN APPEAR IN THE DETAIL BY ENTITY NAME, THE EIN IS: 30-1182456 | | | |
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| tive date, if other than the dat flective date is listed, the date must be If the date inserted in this block ment's effective date on the Depar | does not meet the applicable s | of filing or more than 90 days tatutory filing requirements | optional) after filing.) Pursuant to 60 , this date will not be lis |
| ord specifies a delayed effective da filed. | te, but not an effective time, at | 12:01 a.m. on the earlier o | f: (b) The 90th day aft |
| I MARCH II | . 2020 | | |
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Filing Fee: \$25.00