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COVER LETTER

Div	ision of Corp	orations			
SUBJECT:		USINESS TRADE AND CO	NSULTANCY LLC		
SUBJECT.		Name of Limi	ited Liability Company		
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		PAULO HENRIQUE SEA	DI MOREIRA LIMA		
			Name of Person		
	ACCORD BUSINESS TRADE AND CONSULTANCY LLC .				
Firm/Company					
	180 E DANIA BEACH BLVD				
			Address		
		DANIA BEACH, FL, 3300	04		
			City/State and Zip Code	- 1 - 1 - 2	
		paulohsmlima@gmail.com			
		E-mail address: (t	to be used for future annual report notific	cation)	
For further in	nformation co	ncerning this matter, please ca	ill:		
PAULO LIM	1A		305 859-5994 at ()		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a	check for the	following amount:			
■ \$25.00 F	iling Fce	□ \$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:

TO:

Registration Section

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

ACCORD BUSINESS TRADE AND CONSULTANCY LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 04/04/2019 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number L19000088304 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ACCORD OVERSEAS BUSINESS TRADE AND CONSULTANCY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC". 3034 NW 25th Ave Enter new principal offices address, if applicable: Pompano Beach (Principal office address MUST BE A STREET ADDRESS) FL, 33069 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: 3034 NW 25th Ave 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.

City

POMPANO BEACH

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>	Type of Action
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Note: If the	e date is listed, the date must be spectic date inserted in this block does seffective date on the Department	es not meet the applicab	date of filing or more that le statutory filing requ	n 90 days after filing.) Pursuar irements, this date will not	nt to 605,020 be listed a
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Dated API	RIL 10TH	. 2019			
		, ,	: W.D. A.I		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00