# Division of Corporation Electionic FilingaCever Sheet

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To:

Division of Corporations

Fax Number

[(850)617-6383

From:

Account Name : ASSURED ACCOUNTING AND TAX

120180000048 Account Number Phone

(954)793-0353

(954)944-3163 Fax Number

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

Email Address:\_

#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REAL SOLUTION BUSINESS USA, LLC.

Certificate of Status	0
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Page Coun	04
Estimated Charge	\$25.00

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### ARTICLES OF AMENDMENT

#### TO

## ARTICLES OF ORGANIZATION

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114		Ur '			
REAL SOLUTION BUSINESS USA, LLC.					
(Name of the Limited Hability Company as it now appears on our records.)  (A Bonda Limited Liability Company)					
The Articles of Organization for this Limited Florida document number L1900011602	liabil)				
Florida document number	<u> </u>	<del></del> -			
This amendment is submitted to amend the following					
A. If amending name, enter the new name of the limited liability company here:					
N. C.					
The new name must be distinguishable and contain the	words	'Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if appli	cable	22352 MARTELLA VE			
(Principal office address MUST BE A STRE	ET A	DRESS) BOCA RATON, FL 33433			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)		22352 MARTELLA AVE			
B. If amending the registered agent and registered agent and/or the new registered	/or r	gistered office address on our records, enter the name of the new			
Name of New Registered Agent:  New Registered Office Address:	_	JOAO B. DE OLIVEIRA 22352 MARTELLA AVE			
New Registers Office 1100 553.	-	Enter Florida street address			
		BOCA RATON , Florida 33433			
	1	Clay 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

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10/08/202	D 11:11АМ FAX 9549443163	Assured acconting	<b>∂</b> 30003/0004
or remove MGR =	d from our records:	panage, enter the title, name, and address o	(((H20000350851 3)))
Title	Name	Address	Type of Action
MGR	JOAO B. DE OLIVEIRA	22352 MARTELLA AVE	<b>X</b> Add
		BOCA RATON, FL 33433	☐ Remove
			Change
AMBR	Michel J. Buoery Neto	22352 MARTELLA AVE	
		BOCA RATON, FL 33433	□ Remove
			Ø Change
AMBR	Raquel F. De Jesus Bucery	22352 MARTELLA AVE	Add
		BOCA RATON, FL 33433	□ Remove
			☐ Change
			☐ Remove
			□ Change
			Add
			□ Remove
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			Change
			(((H20000350851 3)))

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Typed or printed name of signee

MICHEL ! BUOERY NETO

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