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## **COVER LETTER**

Division of C			
W. BRAZ	IIL TRADER LLG,	•	
SUBJECT:	<u>,                                      </u>	· <u></u>	
	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
	• •	•	
riease return an corres	pondence concerning this matter	to the following:	
i	CELSO MORAES		
	A COPY ENGINEERING AND A	Name of Person	<del></del>
	ASSELFIS INTERNATIO	NAL LLC	
•	<del></del>	Firm/Company	<del></del>
<b>,</b>	7901 KINGSPOINTE PAR	RKWAY #10	
1	-	Address	<del></del>
	ORLANDO FL 32819		
	CONTACT@ASSELFIS.CO	City/State and Zip Code OM	
	E-mail address: (	to be used for future annual report notif	lication)
For further information	concerning this matter, please concerning	all:	
CELSO MORAES	<b>3</b>	407 826-1034	
<u> </u>		at ()	
. Name	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for	the following amount:		
X \$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)
<u>Mailing Addr</u> Registration		Street Address:	otion
( 🗢	Corporations	Registration Sec Division of Cor	
P.O. Box 63	327	The Centre of T	
Tallahassee	, FL 32314	2415 N. Monroe Tallahassee, FL	e Street, Suite 810 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

W. BRAZIL TRADER LLC					
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company  L19000124163  Florida document number	were filed on and assigned				
This amendment is submitted to amend the following:	İ				
A. If amending name, enter the new name of the limited liab	ility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."				
	8939 LATREC AVE APT 103				
Enter new principal offices address, if applicable:	ORLANDO FL 32819				
(Principal office address MUST BE A STREET ADDRESS)					
	8939 LATREC AVE APT 103				
Enter new mailing address, if applicable:	APT 103				
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO FL 32819				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registe				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida				
Now Bodistand Aportly Signature if shousing Bodistand Aportly	9				
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	City Zip Code  See to act in this capacity. I further agree to comply will performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document				

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 Type of Action <u>Title</u> Name <u>Address</u> MGR DEL NERO, THIAGO 7901 KINGSPOINTE PARKWAY 10  $\Box$ Add ORLANDO FL 32819 Remove □ Change WERBUNG MEDIA INC **AMBR** 8939 LATREC AVE APT 103 **¥**Add ORLANDO FL 32819 □Remove □ Change  $\square$ Add Remove Change  $\square$ Add Remove ☐ Change  $\square$  Add □Remove □Change  $\square$ Add Remove

□ Change

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E. Effect	ive date, if other than t	he date of filin	ıg:			(option:	al)	
(If an eff Note:	ive date, if other than the ective date is listed, the date inserted in this	must be specific and block does not a	d cannot be prior	to date of filing	or more than 9	0 days after tili	ng.) Pursuant to	605.0207 ( listed as t
dogum	ent's effective date on the	: Department of S	State's records.	aore statutory	mig require	ments, this de	ate will hot be	iisteu as t
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doctri		tive date, but no	t an effective ti	me, at 12:01 a	.m. on the ea	rlier of: (b)	The 90th day a	fter the
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lf the recor	d specifies a delayed effected.							
If the recor record is fi	d specifies a delayed effected.  MAY 27		2021					