## ctmen<del>t o</del>f State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: MEDEIROS SOUZA CORP

Account Number: I20190000068

: (407)326-8484

Phone

Fax Number : (407)604-6519

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

Email Address:\_\_

adm@medeirossouza.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PERCIANY INVESTMENTS LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$30.00



TO:

Registration Section

## **COVER LETTER**

Division of Co	rporations		
	Y INVESTMENTS LLC		
SUBJECT:	Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	THAYS KLOPPERS		
		Name of Person	
	MEDEIROS SOUZA COF	RP.	
		Firm/Company	
	845 N GARLAND AVE. S	STE 100	
		Address	2021 SE TAIL
	ORLANDO, FL 32801		FILED 2021 JUN 15 AT 1 SECRETVASSEELFI
		City/State and Zip Code	
	adm@medeirossouza.com		#\land = M
	E-mail address: (	to be used for future annual report notificati	
For further information	concerning this matter, please c	all:	AN 4: 22
Thays Kloppers		407 326-8484	7
Name	of Person	Area Code Daytime Tel	ephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
MailingAddre Registration		<u>StreetAddress:</u> Registration Sectio Division of Corpor	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FI, 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Page: 6 of 8

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PERCIANY INVESTMENTS LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on abbility Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000156942</u> .	were filed on 06/13/3	2019 and assigned	
This amendment is submitted to amend the following:			
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 Liabil	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2380 WHISPERING	3 MAPLE DRIVE	
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 323	337	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  MEDEIROS SO		rds, <u>enter the name of the new registerec</u>	
Name of New Registered Agent:			
New Registered Office Address: 845 N GARLA	845 N GARLAND AVE, STE 100  Four Florida street address		
CDL 12/DO	1,800 1 100 100		
ORLANDO	City	Florida 32801 Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	in the standard months with the	

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.

To: 18506476383

Page: 7 of 8

2021-06-15 13:50.04 UTC

14076046519

From: RUBEM SOUZ

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>	Name	Address	Type of Action
AMBR	Rebecca Soares Marques Perciany	2380 WHISPERING MAPLE DRIVE	<b>≣</b> Add
		ORLANDO, FL 32837	
			□ Add
			□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
<del></del>			□Add
			ERemove
		<u></u>	□Change
			🗀 Add
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			Change

From: RUBEM SOU2

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			22 RIE RIE RIE RIE RIE RIE RIE RIE RIE RIE	
E. Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	si he specific and cannot he prior to dat lock does not meet the applicable:	te of filing or more than 90 days af	otional)  Figure (1)  Figure (1)  Figure (2)  Figure (3)  Figure (4)  Figure (	(3)(b) he
If the record specifies a delayed effecti record is filed	ve date, but not an effective time, a	at 12 01 a m on the earlier of	(b) The 90th day after the	
Dated	2021			
- L				
<u>-</u>	Signature of a member or authorized	I representative of a member		
RUBEM SOUZA				
	Typed or printed na	me of signee		