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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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| | Registration Se Division of Cor | | · | | | |
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| el:bleen | | ERPRISE LLC | | | | |
| SUBJECT | Name of Limited Liability Company | | | | | |
| | | | <u>-</u> | | | |
| Please reti | irn all correspo | ndence concerning this matter | to the following: | | | |
| | | LEONARDO FIGUEIREE | 00 | | | |
| | | Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: LEONARDO FIGUEIREDO Name of Person SOLUTION ADVISING LLC Firm/Company 5728 MAJOR BLVD SUITE 609 Address ORLANDO, FL 32819 Ctty/State and Zip Code INFO@SOLUTIONADVISING.COM E-mail address: (to be used for future annual report notification) oncerning this matter, please call: | | | | |
| | | SOLUTION ADVISING I | .L.C | | | |
| | | | Firm/Company | | | |
| | | 5728 MAJOR BLVD SUF | ГЕ 609 | | | |
| | | | Address | | | |
| | | ORLANDO, FL 32819 | | | | |
| | | · <u> </u> | City/State and Zip Code | | | |
| | | <u> </u> | | | | |
| | | E-mail address: (t | to be used for future annual report notifi- | cation) | | |
| For further | r information co | oncerning this matter, please co | मी: | | | |
| LEONAR | DO FIGUEIRE | EDO | | | | |
| | Name of | Person | Area Code Daytime | Telephone Number | | |
| Enclosed i | s a check for th | e following amount: | | | | |
| \$25.00 |) Filing Fee | | Certified Copy | Certificate of Status & Certified Copy | | |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 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

| Company as it now appears on our records.) mited Liability Company) | |
|--|--|
| opany were filed on 07/18/2019 | and assigned |
| | |
| | |
| d liability company here: | |
| H.iability Company," the designation "LLC" or | |
| | 71. 21. 21. |
| <u> </u> | ALL AHA |
| | PH SSE |
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| | |
| ed office address on our records, <u>er</u> <u>s here</u> : | nter the name of the new |
| | |
| Enter Florida street address | |
| | |
| , Florid | Xip Code |
| | d liability company here: Liability Company," the designation "LLC" or the designation "LLC" or the designation that the designation t |

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 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 |
|--------------|------------------------------|--|----------------|
| AMBR | MICHELLY S. CORREA COELHO | AV. SENADOR PINHEIRO MACHADO N 934 APT 62 | |
| | | SANTOS. SP 11065002 BR | ■ Remove |
| | | • | ☐ Change |
| AMBR | OLIMPIA JUNKO SASAKI | RUA ALVARO AUGUSTO DE ALMEIDA N.130 | ■ Add |
| | | VILA TATETUBA, SAO JOSE DOS CAMPOS - SP 12220-090 | □ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | · | Add |
| | | | ☐ Remove |
| | | | Change |
| | | | |
| | | | □ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | ☐ Remove |
| | | | □ Change |

| "BLIX ENTERPRISE LLC" / | AND ADD OLIMPIA JUNKO SASAKI (AMBR). EVERYTHING ELSE STAYS |
|--|--|
| THE SAME. | |
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| ctive date, if other than the d | late of filing: |
| effective date is listed, the date must be the date inserted in this blocument's effective date on the Dep | late of filing: |
| record specifies a delayed enter the recor | effective date, but not an effective time, at 12:01 a.m. on the earlierd is filed. |
| AUGUST 16th | . 2019 |
| | |
| | ignature of a member or authorized representative of a member |

Page 3 of 3

Filing Fee: \$25.00