13/09/2023, 15:34 Division of Corporations

L23000190397

# Florida Department of State
## Division of Corporations
## Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : E&G FINANCIAL GROUP LLC
Account Number : I20220000177
Phone : (689)269-8784
Fax Number : (407)536-4393

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

Email Address: info@egfinancialgroup.com

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

**BROTHERS MRS LLC**

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 06 |
| Estimated Charge | $25.00 |

FILED
2023 SEP 13 PM 4:06
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 SEP 14 AM 10:52

Electronic Filing Menu Corporate Filing Menu Help T. LEMIEUX

SEP 14 2023

# COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BROTHERS MRS LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VINICIUS EVANGELISTA
Name of Person

E&G FINANCIAL GROUP LLC
Firm/Company

2512 DR PHILLIPS BLVD, SUITE 50-912
Address

ORLANDO, FLORIDA 32819
City/State and Zip Code

INFO@EGFINANCIALGROUP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VINICIUS EVANGELISTA at (689) 269-8284
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

■ $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)

**Mailing Address:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:**
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# ARTICLES OF AMENDMENT
# TO
# ARTICLES OF ORGANIZATION
# OF

BROTHERS MRS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/24/2019 and assigned Florida document number L19000190397

This amendment is submitted to amend the following

A. If amending name, enter the new name of the limited liability company here:

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 applicable:**
*(Principal office address MUST BE A STREET ADDRESS)*

4823 DEDICATION ST
KISSIMMEE, FL 34746

**Enter new mailing address, if applicable:**
*(Mailing address MAY BE A POST OFFICE BOX)*

7512 DR PHILLIPS BLVD
SUITE 50-912
ORLANDO, FL 32819

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: E&G FINANCIAL GROUP LLC

New Registered Office Address: 7512 DR PHILLIPS BLVD, SUITE 50-912
*Enter Florida street address*

ORLANDO, Florida 32819
*City* *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**

**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**

| Title | Name | Address | Type of Action |
|---|---|---|---|
| AMBR | ARAGAO MORAES, JULIO C | 4823 DEDICATION ST | ☐ Add |
| | | KISSIMMEE, FL 34746 | ☐ Remove |
| | | | ■ Change |
| AMBR | ARAGAO MORAES, MARCELO H | 4823 DEDICATION ST | Add |
| | | KISSIMMEE, FL 34746 | Remove |
| | | | ■ Change |
| AMBR | IGHA INVESTMENTS LLC | 7512 DR PHILLIPS BLVD, SUITE 50-912 | ☐ Add |
| | | ORLANDO, FL 32819 | ☐ Remove |
| | | | ■ Change |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

N/A

**E. Effective date, if other than the date of filing: _____ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated AUGUST 23, 2023.

Signature of a member or authorized representative of a member

JULIO CESAR ARAGAO MORAES

Typed or printed name of signee