h19000235247

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COVER I	LETTER
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	tegistration Se Division of Cor	porations		٤
811D 11727		≈ CHINTERNATIONAL LLC	· •	•
SUBJECT	I:	Name of Lin	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	irn all correspo	ndence concerning this matter	to the following:	
		Aurelio Penteado		
			Name of Person	
		ONE TOUCH CONSULT	ING SERVICES LLC	
			Firm/Company	
	6965 PIAZZA GRANDE AVE, STE 401A			
			Address	
		ORLANDO, FL 32835		
			City/State and Zip Code	
		onetouch@onetouchconsul	-	
		E-mail address; (to be used for future annual report not	itication)
For furthe	r information e	oncerning this matter, please c	all:	
Aurelio P	enteado		407 779-4362	
	Name o	f'Person		ie Telephone Number
Enclosed i	s a check for th	ne following amount:		
\$25.00	9 Filing Fee	\$30.00 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)

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

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Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2445 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2012

MBSB TECH INTERNATIONAL LLC		- . E	FEB	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	•	٦ ور	
The Articles of Organization for this Limited Liability Company we Florida document number L19000235247	ere filed on	an	nd assign	ied ••
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liabilit</u>	ty company here:			
5G TECHNOLOGY TRADING LLC				
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviat	ion "L.tC	·
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
-				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:		
New Registered Office Address:	Emer Florida street o	uldress
	City	_, Florida

New Registered Agent's Signature, if changing Registered Agent:

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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, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

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MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			🗌 Remove
			□Change
			🗆 Add
		<u></u>	
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			□Change
			🗆 Add
			□ Change

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

The partners would like change the company name.

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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 February 3rd

2021

Nava (dini

lignature of a member or authorized representative of a member-

MARCELO BORDINI (AMBR)

Typed or printed name of signee

Filing Fee: \$25.00