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 : DOMINIUM CONSULTING SERVICES, LLC

Account Number : I20210000039 Phone : (407)374-2329

: (407)412-5926 Fax Number

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REAMAM, LLC

Certificate of Status	0
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2021 DEC -8

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COVER LETTER

	Registration Se Division of Cor			
SUBJEC	REAMAM			
SUBJEC	JT:	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		CLEITON CARDOSO		
			Name of Person	
		DOMENIUM CONSULTI	NG SERVICES	
			Firm/Company	
		6965 PIAZZA GRANDE	AVE - SUITE 206	
			Address	
		ORLANDO FLORIDA 32	835	
			City/State and Zip Code	
		SERVICES@DOMINIUM		
		E-mail address: (to be used for future annual report not	ification)
For furth	ner information o	oncerning this matter, please co	all:	
CLEITO	NC		407 374-2329	
-	Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed	d is a check for t	he 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Page: 5 12/8/2021 07:28 AM TO:18506176383 FROM:3213199949

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REAMAM, LLC		10
(<u>Name of the Limited Liability Comp</u> ar (A Florida Limited U	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L19000265234</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abl	previation "L.L.C."
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 of registered agent and/or the new registered office address here	fice address on our records, <u>enter</u> :	the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am f provided for in Chapter 605, F.S. Or,	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

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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 _	Amelio Jose Tazoniero Junior	6965 PIAZZA GRANDE AVE	
		SUITE 206	☐ Remove
		ORLANDO, FL 32835	⊞ Change
		,	
			☐ Remove
			□ Add
			☐ Remove
			Change
			☐ Remove
			Change
			□ Add
			Remove
			☐ Change
			☐ Remove
			□ Change

	FROM AMÃOLIO JOSÃO TAZONIERO JUNIOR	
	TO: AMELIO JOSE TAZONIERO JUNIOR	
		~
		2021 (
		3
		- &
		AH 10:
		<u></u>
		-
E E	Tective date, if other than the date of filing:	
(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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	o 605. e liste
<u>: </u>	ocument's effective date on the Department of State's records.	
	(Continue that a second of the continue that a second of the conti	a elic
If the	e record specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the 6 The $90th$ day after the record is filed.	:arne

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00