# L19000275833

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
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2021 NOV 29 AM 7:37 SECRETARY OF STATE

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#### **COVER LETTER**

TO: Registration Se Division of Cor				
CNEUA, LI	LC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.		
	ndence concerning this matter			
Trease return an correspo	ndence concerning and manage			
	RODRIGO M DE CARV	ALHO		
		Same of Person		
	CNEUA, LLC			
		Limit Company		
7131 GRAND NATIONAL DRIVE, SUFFE 103				
		Address	<del></del>	
	ORLANDO, FL 32819			
		City/State and Zip Code	<del></del>	
	marcella q eccoplaneteonsi		<del></del>	
		to be used for future annual report not	itication)	
For further information c	oncerning this matter, please o	ali.		
ALFREDO I, TRINDADE		at () Area Code Daytime Telephone Number		
Name o	t Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	560.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed?	
Moiling Address Registration	Section	Street Address: Registration Se		
Division of C P.O. Box 631	•	Division of Corporations The Centre of Tallahassee		
Tallahassee.		2415 N. Monro	oe Street, Suite 810	

Tallahassee, Fl. 32303

### FILED

## 2021 NOV 29 AM 7: 37 ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION AHASSEE, FL TO

CNEUA, LLC	
(Name of the Limited Liabilit (A Florida	ty Company as it now appears on our records.) Timited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number 1.19000275833	ompany were filed on 11/18/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limi</u>	ited liability company here:
The new name must be distinguishable and contain the words "Lim	ited I jability Company," the designation "I.I.C" or the abbreviation "I. I. C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	(ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Flarida street address
	. Florida

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	RLM BUSINESS, LLC	7131 GRAN NATIONAL DR., STE. 103	
		ORLANDO, FL 32819	= Remove
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			□Remove
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fective date, if other than the in effective date is listed, the date mu ote: If the date inserted in this b iscument's effective date on the I	st be specific and cannot b lock does not meet the	applicable statut	ling or more than 90 ory filing requirer	(optional) days after filing.) Pur nents, this date will	suant to 605.0207 not be listed as
ecord specifies a delayed effecti is filed.	e date, but not an effec	tive time, at 12:0	) I a.m. on the ear	lier of: (b) The 90	th day after the
ORLANDO	1148	2021			
	<b>X</b> /				
	Signature of a member of	southorized repre	sentative of a memb	er	<del></del>

Filing Fee: \$25.00