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T. MATTHEWS FEB 10 2022

COVER LETTER

Division of Co.		•	ů L
(3.0.185.0.83.4.393)	R USA LLC	•	•
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	GISELI COCKLIN		
		Name of Person	
	CS TOWER USA LLC		
		Firm/Company	
	7680 UNIVERSAL BLVI	D. SUITE 330	
		Address	
	ORLANDO, FL 32819		
	GG@CSTOWERUSA.CO	City/State and Zip Code M	
	E-mail address: (to be used for future annual report noti-	fication)
For further information of	concerning this matter, please c	ail:	
GISELI COCKLIN		407 407-592-097 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed 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 Addres	74°	Street Address	

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

22 Fiz -2 Fiz 3: 08

CS TOWER USA LLC

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

	City	Zip Code
		_, Florida
	Enter Florida street o	address
New Registered Office Address:		
Name of New Registered Agent:		
B. If amending the registered agent and/or registagent and/or the new registered office address he		enter the name of the new registere
	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX		
Enter new mailing address, if applicable:		
(Principal office address MUST BE A STREET A.		
Enter new principal offices address, if applicable	<u> </u>	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the	limited liability company here:	
This amendment is submitted to amend the following	ng:	
Florida document number L20000042957		
The Articles of Organization for this Limited Liabili		and assigned

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	CAIO DE CARVALHO SILVA	RUA B11 QUADRA - LOTE 10 JARDINS PARIS	⊞ ∆đd
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			🗆 Change
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ective date, if other than the da effective date is listed, the date must be e: If the date inserted in this block ument's effective date on the Depar	specific and cannot be does not meet the a	prior to date of filing pplicable statutory	g or more than 90 day	(optional) as after filing.) Pursuan ts. this date will not	n to 605.020 be listed a
cord specifies a delayed effective da s filed.	ite, but not an effect	ive time, at 12:01	a.m. on the earlier	of: (b) The 90th d	ay after the
JANUARY 28TH	. 2022	<u>. </u>			
.u					
ed	Jako	ia fo	roil		

Filing Fee: \$25.00