Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

To

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068

Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address: Contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GAJATECH HOLDING LLC

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TO:

COVER LETTER

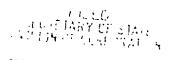
TO: Registration Se Division of Cor			
	THOLDING LLC		
SUBJECT:	Name of Lim	ited Liability Company	····
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	
	Medeiros Souza corp		
		Firm/Company	
	845 N GARLAND AVE. S	STE 100	
		Address	
	ORLANDO, FL 32801		
		City/State and Zip Code	
	contact@medeirossouza.com		
		to be used for future annual report not	afication)
For further information c	oncerning this matter, please of	all:	
Rubem Souza		407 326 - 8484 at ()	
Name o	f l'erson	Area Code Dayin	ne Felephone 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)	S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddres</u> Registration !		<u>StreetAddress:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	27	The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



14076046519

2022 NOV -4 AHII: 27

GAJATECH HOLDING LLC		_	
(Name of the Lim	ited Liabitity Compa (A Florida Limited)	ny a <u>s it now appears on our records.</u>) Liability Company)	
The Articles of Organization for this Limited I Florida document number	Jiability Company	were filed on 03/03/2020	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		11918 Otterbrooke trl. Windermo	ere, FL 34786
Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	11918 Otterbrooke trl, Winderma	ere, FL 34786
B. If amending the registered agent and/or	registered office ess here:	address on our records, <u>enter t</u>	ne name of the new registe
agent ang/or the new registered office addr			
Name of New Registered Agent:	Medeiros Sonz	a Corp	
Name of New Registered Agent:	Medeiros Sonz 845 N Garland	Ave STE 100	
Name of New Registered Agent: New Registered Office Address:		Ave STE 100 Enter Florida street address	ida ³²⁸⁰¹

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

From: RUBEM SOUZA 14076046519

Го:

Page: 6 of 7 2022-11-04 14:21:36 GMT

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			DAdd
			Remove
			□ Change
			□ Add
			Remove
			Change
			Remove
			Change
			□ Remove
			□Change
			□Remove
			□Remove
			☐ Change

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If amending any other informa	tion, enter change(s) here:	(Attach additional sheets, if	2022 NOV -4 AM IL
-			
			
			
			<u> </u>
			
Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the L	st be specific and cannot be prior to lock does not meet the applical	o date of filing or more than 90 days	optional) after filing.) Pursuant to 605,0207 (; s, this date will not be listed as th
ne record specifies a delayed effectioned is filed	re date, but not an effective tin	ne, at 12:01 a.m. on the cartier o	ਗੰ (h) The 90th day after the
Dated Orlando	11/03/2022	_ ·	
<u> </u>			
	Signature of a member of author	rized representative of a member	
Rubem Souza			
	Typed or printer	d name of signee	