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## **COVER LETTER**

TO:

TO: Registration Division of C						
	ON SELLER GROUP					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.				
Please return all corres	spondence concerning this matter	r to the following:				
	ALINE CARVALHO					
		Name of Person		-		
	FERRO SELLER GROUI	P LLC		Č.	202	
	<del> </del>	Firm/Company			<u> </u>	"Tį
	8745, LOOKOUT POINT	TE DR		TALLAIN.	12 HUL 2202	12
		Address		တင		į T
	WINDERMERE/FL 3478	36			PM 12: 39	O
	acarvalho@oaktaxusa.com	City/State and Zip Code			ა <b>9</b>	
		(to be used for future annual report notif	ication)			
For further information	n concerning this matter, please of	rall:				
ALINE CARVALHO		407 8612942 at ( )				
Nam	e of Person		e Telephone Number			
Enclosed is a check fo	r the following amount:					
□ \$25,00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Stan		
P.O. Box 6	n Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 8	10		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMAZON SELLER GROUP LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 09/01/2020 and assigned Florida document number [L20000273006] This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FERRO SELLER GROUP LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LEC" or the abbreviation—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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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:

MCP = Manager

MGK -	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		WINDERMERE,FL 34786	<b>≡</b> Remove
			□Change
AMBR	FERRO, HIGOR HENRIQUE A	8745 LOOKOUT POINTE DR	<b>≣</b> Add
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ective date, if other than the dat n effective date is listed, the date must be	te of filing:specific and cannot be prior	to date of filing or i	(o more than 90 days a	<b>ptional)</b> ifier filing.) Pursu	ant to 605.02
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ecord specifies a delayed effective da is filed.	te, but not an effective ti	me, at 12:01 a.m	, on the earlier of	: (b) The 90th	day after th
FLORIDA, MAY 19	2022	<u> </u>			
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