

12/10/2021 12:39 PM

Division of Corporations

No. 1734

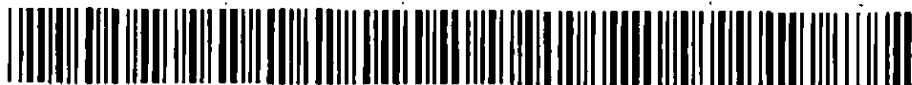
Florida Department of State

Division of Corporations

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To:

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INTEGRATION DEVELOPERS LLC**

Certificate of Status	0
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Page Count	03
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2021 DEC 13 PM 4:28

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2021 DEC 13 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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VH

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
INTEGRATION DEVELOPERS LLC**

The Articles of Organization for this Florida Limited Liability Company were filed on 01/13/2021 and assigned Florida document number: L21000028979
EIN NUMBER: 86-1822228

Article I

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C.,"

Article II

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**)

Article IV

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:

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

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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

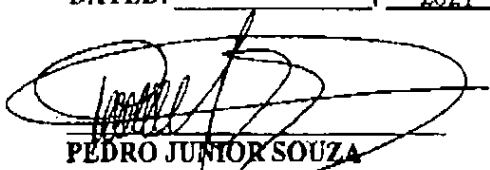
Title	Name	Address	Type of Action
AMBR	BARBOSA, FLAVIO AUGUSTO	15789 SWEET LEMON WAY	REMOVE <input checked="" type="checkbox"/>
		WINTER GARDEN, FL 34787	ADD <input type="checkbox"/>
AMBR	PIRES BARBOSA, ANDREIA LUCAS	15789 SWEET LEMON WAY	REMOVE <input checked="" type="checkbox"/>
		WINTER GARDEN, FL 34787	ADD <input type="checkbox"/>
AMBR	JUNIOR SOUZA, PEDRO	12513 MONTALCINO CIRCLE	REMOVE <input checked="" type="checkbox"/>
		WINDERMERE, FL 34786	ADD <input type="checkbox"/>
AMBR	GESEIRA DA SILVA, ROSANGELA	12513 MONTALCINO CIRCLE	REMOVE <input checked="" type="checkbox"/>
		WINDERMERE, FL 34786	ADD <input type="checkbox"/>
AMBR	INTEGRATION LLC.	4654 PRAIRIE CREEK STREET	REMOVE <input type="checkbox"/>
		WINTER GARDEN, FL 34787	ADD <input checked="" type="checkbox"/>
AMBR	1TO6 LLC	15789 SWEET LEMON WAY	REMOVE <input type="checkbox"/>
		WINTER GARDEN, FL 34787	ADD <input checked="" type="checkbox"/>

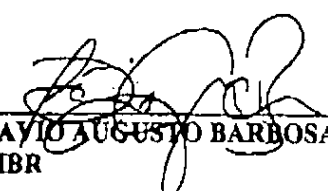
C. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

D. Effective date, if other than the date of filing: (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

DATED: December 13th, 2021


PEDRO JUNIOR SOUZA
AMBR


FLAVIO AUGUSTO BARBOSA
AMBR

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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