Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : POPPI ENTERPRISES & TECHNOLOGY LLC

Account Number : I20210000079 Phone : (754)215-9616 Fax Number : (754)264-8289

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

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN POOL FIRST LLC

Certificate of Status	1 .
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Help

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TO: Registration Section

COVER LETTER

Division of Cor	porations				
400.100 1814 1111	POOL FI	RST LLC			
SUBJECT:	Name of him	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	ROBE	RTA BATANO SILVA			
		Name of Person			
		PRISES & TECHNOLOGY LLC			
		Firm Company			
		4043 ALLERDALE PL			
		Address			
	cc	OCONUT CREEK, FL 33073			
		City/State and Zip Code	AND		
	POPPIC	ONSULTING@GMAIL.COM			
	E-mail address: (to be used for future annual report not	ification)		
For further information of	oncerning this matter, please c	all:			
ROBERTA HATANO SILVA		754 2159616			
ROBERTA HATANO SILVA Same of Person		Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
.) \$25.00 Filing Fee	€ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (adminul.copy is crolosed)	☐ \$60.00 Fitting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Registration 5		Street Address: Registration Se	ection		
Division of C	Corporations	Division of Corporations			
P.O. Box 632		The Centre of			
Tallahassee,	FL 32334	2415 N. Monro	oc Street, Suite 810		

Tallahassee, FL 32303

company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POOL FIR				
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appea landity Company)	rs on our records.)	paris and a disposal 4-11 60 or em	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	01/41/2021	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company h	ere;		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the c	designation "LLC" or the a	bbreviation "L.t. C"	
Enter new principal offices address, if applicable:		٧	Ø 50 ≥	
(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 a agent and/or the new registered office address here:		records, <u>enter the nar</u>	FLORIDA	
Name of New Registered Agent:		•		
New Registered Office Address:	Enter Flo	rtda street address		
	City Zip Code			
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as I being filed to merely reflect a change in the registered office	performance of provided for in	f my duties, and Lam Chapter 605, F.S. Or	familiar with and , if this document is	

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

Page: 5 of 6

<u>Title</u>	Name	Address	Type of Action
AMBR	RAFAEL YUFTI ARANTES	8091 RED JASPER EN #604	J Add
		DELRAY BUACH, FL 33446	
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			□ □ Clange
			[] Add
			[]Change
±			CAdd
			□ Renswe
			C Change
			UAdd
			CRemove
		± 1732±20	DChange
			DAdd
			ERennove
			Charan

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

To: +18506176383

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From: Roberta \$

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Filing Fee: \$25.00