Division of Corporations Electronic Filing Cover Sheet

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(((H21000317523 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SOUSA & ASSOCIATES INC

Account Number : I20190000111 Phone : (407)800-7028 Fax Number : (407)992-9407

**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 THE COSTA GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hal 0003175233

(Name of the Limited Linbility Compar (A Florida Limited L	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company Horida document number £21000038745	were filed on <u>01/19/2021</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	llity company here:	
THE BELL COSTA GROUP LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		11.50
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:	address on our records, <u>enter t</u>	ne name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida Zip Code
	City	Zip Code
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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COVER LETTER

	Registration Section Division of Corporations	HQL 000 317523-3
SUBJEC	THE COSTA GROUP LLC	ū
	Name of Limited Liability Company	Name of Limited Liability Company and fee(s) are submitted for filing. cerning this matter to the following: Sousa Name of Person Associates Inc Firm/Company
The enclos	sed Articles of Amendment and fee(s) are submitted for filing.	
Please retu	irn all correspondence concerning this matter to the following:	
	Maria C Sousa	
	Name of Person	
	Sousa & Associates Inc	
	Firm/Company	
	5728 Major Blvd , Ste 309	
	Address	
	Orlando, FL, 32819	
	City/State and Zip Code	
	info@sousanassociates.com	
	E-mail address: (to be used for future annual r	report notification)
For further	information concerning this matter, please call:	
Maria C S	at ()	0-7028
	Name of Person Area Code	Daytine Telephone Number

HQ1 000 317523-3

Page:

8 . 08/24/2021

10:45 AM

TO:18506176383 FROM:3215598192

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 = N AMBR = A	Innager authorized Member	121	000 317523 3
<u>Title</u>	Name	Address	Type of Action
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ecord specifies a delayed effective is filed	date, but not an effective tim	e, at 12:01 am on the earlier	of (b) The 90th day after	(the

Typed or printed name of signee

CARLOS EDUARDO FARIA COSTA

H21000 3175033