

L21000260598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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OCT 28 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 OCT 11 PM 8:16

October 1, 2021

MARIA M CALDAS-LOPES
12811 KENWOOD LANE, STE 208
FT MYERS, FL 33907

SUBJECT: THAYLON'S PAVERS PRO, LLC
Ref. Number: L21000260598

We have received your document for THAYLON'S PAVERS PRO, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 421A00023756

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THAYLON'S PAVERS PRO, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA M. CALDAS-LOPES

Name of Person

MADE IN BRAZIL SERVICES

Firm/Company

12811 KENWOOD LANE SUITE 208

Address

FORT MYERS, FLORIDA 33907

City/State and Zip Code

MADEINRAZILSERVICES@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA M. CALDAS-LOPES

239 810-6079
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Filed 11:12:11

THAYLON'S PAVERS PRO, 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 06/04/2021 and assigned
Florida document number L21000260598.

This amendment is submitted to amend the following:

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

N/A

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2126 GRACE AVENUE

FORT MYERS, FLORIDA 33901

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2126 GRACE AVENUE

FORT MYERS, FLORIDA 33901

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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

N/A

, Florida N/A

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DE OLIVEIRA ASSIS, ALEX T	5540 MALT DR.	<input type="checkbox"/> Add
		APT#4	<input checked="" type="checkbox"/> Remove
		FORT MYERS, FL 33907	<input type="checkbox"/> Change
AMBR	DE SOUZA CARDOSO, THAIS	2126 GRACE AVENUE	<input checked="" type="checkbox"/> Add
		FORT MYERS, FLORIDA 33901	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

N/A

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14 PM 12:11

E. Effective date, if other than the date of filing: 09/10/2021 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER 10TH, 2021

Alex Thaysen de Oliveira Thais de Souza Cardoso
Signature of a member or authorized representative of a member

ALEX T. DE OLIVEIRA (MGR) THAIS DE SOUZA CARDOSO (AMBR)

Typed or printed name of signee