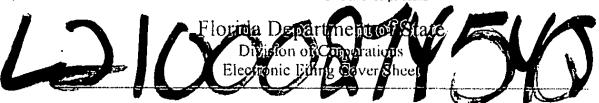
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To:

Division of Corporations



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From:

Account Name : YOBI TECHNOLOGY, LLC

Account Number : I20200000112

: (407)832-7240

Fax Number

: (407)612-2313

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## From: Antonio Cardoso

## COVER LETTER

SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	undence concerning this matter to	o the following:	
	ANTONIO CARDOSO		
	THE THOUGH THE SECOND S	Name of Person	- 190-19 (deb
	EXCEL TOTAL BUSINES	S	
		Firm/Company	
	7065 WESTPOINTE BLVD	) #301	
	* Hand the Market for the page 1	Address	
	ORLANDO, FL 32835		
		City/State and Zip Code	
	ACCT@EXCELTOTALBUS		
	- management de la company		[sation]
rot nitther information o	concerning this matter, please cal	I:	
ANTONIO CARDOSO		407 832-7240 at ()	
Name (	of Person	Area Code Daytime	Telephone Number
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13 021 100 7 12mg 1 00	Certificate of Status	Certified Copy  (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre	<u>191</u> Section	Street Address:	tion
Mailing Address Registration Division of C P.O. Box 632	Section · · · · · · · · · · · · · · ·	Street Address:  Registration Sec Division of Corp The Centre of Ta	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

he Articles of Organization for this Limited Liability.Company wer	53 Glad on 06/02/2021	. ,
lorida document number £21000274540	re filed on od/02-2021 and ass	ignea
iorida document number		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability	company here:	
he new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" or the abbreviation "L.	L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
_		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office add	ress on our records, enter the name of the new	y registe
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
The state of the control of the cont	Enter Florida su cet address	
	, Florida	
<del></del>	City Zip Code,	<u> </u>
ew Registered Agent's Signature, if changing Registered Agent:		
héréby accépt the appointment as régistèred agent and agree to	The second secon	
ногын кылым те ирронишенгиз гедышген ихенгини ихгее и	o act at his capacity. I farther agree to comp formance of my duties, and I am familiar with	ay wun .

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

Title ·	<u>Name</u>	Address	Type of Action
MGR	Francisco M Brandao Junior	10714 Reams Road	□Add
		Windermere, FL 34786	
			<b>≅</b> С¹іялде
MGR	Ane G Oliveira Dias Brandao	10714 Reams Road	DAdd
		Windermere, FL 34786	
			<b>≅</b> Change
MGR	Carlos Eduardo Correia	18234 Ofiver Twist Way	ClAdd
			□Remove
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From: Antonio Cardoso

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E. Effective date, if other than the	06/10/2023		(optio <b>nal</b> )	
(If an effective date is listed, the date must Note: If the date inserted in this ble document's effective date on the De	be specific and cannot be prior sek does not meet the applic	able statutory filing require	M) days after filing:) Pursuancto	605.0207 (3)(b)
If the record specifies a delayed effective record is filed.	e date, but not an effective t	ime, at 12:01 a.m. on the co	arlier of: (b) The 90th day a	after the
Dated	2023	1 .		
Dated	<del></del>	Dry	·	
	<i>f</i>	1/ 00		

Typed or printed name of signee