Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000000729 3)))



H240000007293ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I2019000068 Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address: contact@medeirossouza.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SHARP SPEAR INVESTMENTS LLC

Certificate of Status	()
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

K. SALY

JAN - 4 2024

Registration Section

TO:

## **COVER LETTER**

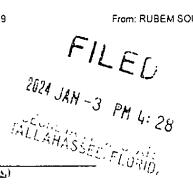
Division of Co	rporations		
SHARP S	PEAR INVESTMENTS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
riease return an corresp	ondence concerning this matter	to the following.	
	Rubem Souza		
		Name of Person	<del></del>
	Medeiros Souza corp		
		Firm/Company	
	1711 Amazing Way, Ste 213		
		Address	
	Ococe, FL 34761		
		City/State and Zip Code	
	contact@medeirossouza.co	n	
	E-mail address: (	to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
Rubem Souza		407 326 - 8484	
Name	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>560.00 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
<u>Mailing</u> Addre	85:	StreetAddress:	
Registration	Section	Registration Se	
Division of Corporations		Division of Co	rporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SHARP SPEAR INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)

	(A Florida Limited t	nability Company)	
The Articles of Organization for this Limited I		were filed on 07/19/2021	andassigned
Florida document number L21000328237	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabii	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	•	
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	·	
			<del></del>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
	<u></u>		
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	_		me of the new registered
New Registered Office Address:	1711 Amozing Way, Ste 213		
New Negistered Office Address.		Enter Florida street address	
	Ocoee	City Florida	14761
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as regbeing filed to merely reflect a change in the company has been notified in writing of this	per and complete sistered agent as p registered office	performance of my duties, and I an provided for in Chapter 605, F.S. O.	n familiar with and r, if this document is
	If Chan	ging Registered Agent, Signature of New B	tegistered 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>	Name	Address	Type of Action
AR.MGR	ALVES DE ARAUJO JR, EDSON	5133 CITRUS LEAF BLVD	□ Add
		WINTER GARDEN, FL 34787	□Remove
AMBR	Golden Arch Enterprises Corp	1711 AMAZING WAY STE 213	<b>=</b> Add
		OCOEE, FL 34761	□Remove
			□Change
			□ □Add
			255 3 3 Change
			11.0300 C
			□Remove
			☐ Change
	<u> </u>		□Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			□ Change

D. If amending any other info	ormation, enter change(s) here: (Attach a	dditional sheets, if necessary.)
		7. 22
		PH 4: 28
·		28
·		
		1.1.1 <del>0.11.1</del>
-		
	<u></u>	
<del></del>		
Note: If the date inserted in t	n the date of filing:	(optional) g or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) y filing requirements, this date will not be listed as the
If the record specifies a delayed et record is filed	fective date, but not an effective time, at 12:01	a.m. on the earlier of: (b). The 90th day after the
Dated Orlando	01/03/2024	
Nated	·	
<u> </u>	Signature of a member or authorized represen	ntative of a member

Typed or printed name of signee