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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DOMUS GLOBAL TAX ADVISORS LLC

Account Number : I20200000162 Phone : (407)334-7001

Fax Number : (123)456-7890

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

Email Address: FERNANDA@CONUSCIOBALTAX.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JUJUDICASA LLC

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# COVER LETTER

TO: Registration Se Division of Cor				
JUJUDICA	SA LLC			
SUBJECT:				
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	Amendment and fec(s) are sub			
Please return all correspo	indence concerning this matter	to the following.		
	FERNANDA FIGUEIRED	00		
		Name of Person	<del></del>	
	DOMUS GLOBAL TAX /	ADVISORS LLC		
		Firm:Company		
	7680 UNIVERSAL BEVD	STE 510		
		Address		
	ORLANDO, FL 32819			
		City State and Zip Code		
	FERNANDA@DOMUSGL			
	E-mail address: (	to be used for future annual report no	tilication)	
For further information c	oncerning this matter, please c	ull:		
FERNANDA FIGUEIREDO		407 334-7001		
Name of Person		at ()	me Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55 00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre Registration		Street Address: Registration S	ection	
Division of C		Division of Co	orporations	
P.O. Box 632	27	The Centre of		
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

# 171 OCT -7 PM

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUJUDICASA LLC			7
(Name of the Limit	ted Liability Company (A Florida Limited Lial	as it now appears on our ulity Company)	records.)
The Articles of Organization for this Limited L Florida document number L21000436765			CORING 2: 19
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liabilit	v company here:	
The new name must be distinguishable and contain the v	vords "Limited Liability	Company," the designation	"LLC" or the alibreviation "L.L.C"
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u> .		
B. If amending the registered agent and/or agent and/or the new registered office addre		dress on our records,	enter the name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	New Registered Office Address: 7680 UNIVERSAL BLVD STE 510		
Enter Florida street address			
	ORLANDO		_, Florida <u>32819</u>
		City	Zip Cock

### 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>	Address	Type of Action
			\Add
			Петю <b>че</b>
			□ Add
			Петюче
			□Remove
			☐ Change
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			Change
			□Add
			□Remove
			□ Change

. It amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessor	77	
		<u></u>	
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Note: If the date inserted in this document's effective date on the	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b)		
f the record specifies a delayed effect ecord is filed.	tive tate, but not an effective time, at 12.07 a.m. on the carrier of (6)	SE	
Dated OCTOBER 07	<u>2021</u> ·	URETA LAHAS	2021 OCT -7
	Signature of a member or authorized representative of a member	TARY ASSEE	-7
	Signature of a member or authorized representative of a member	7.0 7.0	P X
2JF INVESTMENTS	S LLC, represented in this act by JOSE FERNANDES	SIVI SIVI	PM 2: 19
	Typed or printed name of signee	—— <del>———————————————————————————————————</del>	19

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