Page. 1 of 7



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.

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Electronic Filing Menu

Corporate Filing Menu

Help

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

TO: Registration Se Division of Cor			
W&T LLC			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	
	Medeiros Souza corp		
		Firm/Company	
	845 N GARLAND AVE. S	STE 100	
		Address	
	ORLANDO, FL 32801		
		City/State and Zip Code	
	contact@medeirossouza.coi	n to be used for future annual report not	ification)
For further information of	concerning this matter, please co		
Rubem Souza		407 326 - 8484	
Name (of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddre</u>		<u>StreetAddress:</u> Projectration Se	ection
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 633		The Centre of	

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

W&T LLC		
(Name of the Lim	ited Liability Company as it now apper (A Florida Limited Liability Company	ars on our records,)
The Articles of Organization for this Limited 1	Jability Company were filed on $\frac{1}{2}$	2/02/2021 and assigned
lorida document number1.21000509325	· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name o	of the limited liability company	<u>here</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	700 2
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our	records, enter the name of the new register
gent and/or the new registered office addr	<u>ess here</u> :	
Name of New Registered Agent:	Medeiros Souza Corp	
New Registered Office Address:	845 N Garland Ave STE 100	
	Enter F	lorida street address
	Orlando	Florida 32801
	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.

Visite Comment of the Project of Asset

If Changing Registered Agent, Signature of New Registered Agent

To: Page

Hamending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

From: RUBEM SOUZA

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Washington José da Silva	2838 RED ALDER BLVD OCOEE, FL 34761	■ Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			🗀 Add
			🗆 Remove
			□Change

From: RUBEM SOUZA

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