L22 000 003 007

(Requestor's Name)
(Address)
· ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100436093111

09/11/24--01019--021 **30.00

24 SEP 11 AH 5: 39

COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

	ENCE COMPANY 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:		
	GEIZA BATALHA			
		Name of Person		
	GMA-GENIUS MARKET	ING & ACCOUNTING LLC		
		Firm/Company		
	9301 AZALEA RIDGE W	AY		
		Address		
	GOTHA-FL 34734			
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code		
	gma.mkacc@gmail.com			
	E-mail address: (to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please ca	all:		
Geiza Batalha		321 20 2-6 855		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 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)	
Mailing Addres Registration S		Street Address: Registration Sec	etion	
Division of C		•	Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXCELENCE COMPANY L	LC			
(Name of the Limi	ted Liability Compar (A Florida Limited I.	y as it now appears on our re- lability Company)	cords.)	
The Articles of Organization for this Limited I. Florida document number1 22000003007	iability Company	were filed on12/23/2021	<u> </u>	_ and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liabi	lity company here:		
EXCELLENCE COMPANY LLC				
The new name must be distinguishable and contain the	vords "Limited Liabili	ty Company." the designation "	LLC" or the abbre	
Enter new principal offices address, if applic	able:	11800 GLASS HOUSE	LN APT 1245	245
Principal office address MUST BE A STREE	ET ADDRESS)	ORLANDO-FL 32836		-0
				<u> </u>
			• • • •	
Enter new mailing address, if applicable:		11800 GLASS HOUSE	LN APT. 1245	က္
Mailing address MAY BE A POST OFFICE	BOX)	ORLANDO-FL 32836	2-X	39

3. If amending the registered agent and/or agent and/or the new registered office addresses		ddress on our records, <u>en</u>	ter the name o	of the new regis
Name of New Registered Agent:	GMA-GENIUS MARKETING & ACCOUNTING LLC			
New Registered Office Address:	9301 AZALEA	RIDGE WAY		
		Enter Florida street ad	ldress	
	GOTHA		Florida 3473	34
		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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	JOSIANE OLIVEIRA PALAORO	11800 GLASS HOUSE LN APT 1245	
		ORLANDO FL 32836	□Remove
		Address	Change
			□Add
		 	Remove
			☐ Change
			□Add
			□Remove
			□Change
			Dbb
			□Remove
			□Change
			🗆 Add
			□Remove
			☐ Change
	4F+ 4Y+		□Add
			□Remove
	,		□Chana.

	PLEASE CORRECT THE NAME TO: EXCELLENCE COMPANY - LLC, AND CHANGE THE NAME OF
RI	GISTERED AGENT AND THE PRINCIPAL ADDRESS AND MAILING ADDRESS.
_	
_	
	
_	
	
ffectiv	e date, if other than the date of filing: (optional) tive 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 (
ote: I	tive 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 (The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as total seffective date on the Department of State's records.
record is file	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 d.
ated _	AUGUST 30 2024

Typed or printed name of signee