

Florida Department of State
Division of Corporations
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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : MEDEIROS SOUZA CORP
 Account Number : I20190000068
 Phone : (407)326-8484
 Fax Number : (407)604-6519

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 SECRETARY OF STATE
 TALLAHASSEE, FL

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@medeirosouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GURU GENERAL SERVICES LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
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C. BRUMBLEY
 SEP 16 2022

2022 SE. 15 PM 3:37

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GURU GENERAL SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rubem Souza
Name of Person

Medeiros Souza corp
Firm/Company

845 N GARLAND AVE, STE 100
Address

ORLANDO, FL 32801
City/State and Zip Code

contact@medeirosouza.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rubem Souza at (407) 326 - 8484
Name of Person Area Code Daytime 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)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MailingAddress:
 Registration Section
 Division of Corporations
 P.O. Box 6327

StreetAddress:
 Registration Section
 Division of Corporations
 The Centre of Tallahassee

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GURU GENERAL SERVICES LLC

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

The Articles of Organization for this Limited Liability Company were filed on 01/26/2022 and assigned
Florida document number 1.22000029339.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____ Florida _____

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.

LL

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Leandro O Toledo	845 N Garland Ave STE 100 ORLANDO FL 32801	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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