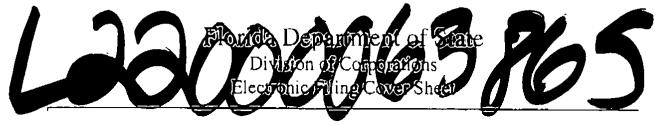
Division of Corporations

11/30/22, 10:48



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(((H22000403201 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SG PROJECT MANAGEMENT LLC

Account Number : I20220000151 Phone : (754)226-4414

Fax Number : (954)613-4136

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

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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PULSE -COMMUNICATION, MARKETING & EVENTS, LLC

Certificate of Status	0
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MAR 18 2023

## H220004032013

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PULSE-COMMUNICATION, MARKETING & EVENTS, LLC

opray es it now appears on our records.) od Liebility Company)		
ny were filed on	and assig	med
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ability Company," the designation "LLC" or the s	abbreviation "L.L.	C.*
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, Florida	Zip Code	
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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

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## H220004032013

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> AMBR	Name Goncalves de souza, carla c	Address HTQ 04, CONJUNTO 05, CASA 65	Type of Action
		BRASILIA, DF 60192-050 BR	≣Remove
			Change
AMBR	GONCALVES DE SOUZA, CARLA C	SHTQ TRECHO I, QUADRA 04, CONJUNTO 05 CASA 65	<b>B</b> Add
		TAQUARI, LAGO NORTE - BRASILIA 71531-420 BR	BA60
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# H 22000403201 3

. If an	neuding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effec (If su el <u>Note:</u> docur	tive date, if other than the date of filing:  [Excive 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 (3)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the next's effective date on the Department of State's records.
e reco ed is f	rd 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
Dated	Branlia 03/09 , 2023
	C_aD
	Signature of a member or authorized representative of a member
	CARLA CRISTINE GONCALVES DE SOUZA
	Typed or printed name of signee

H220004032013

Filing Fee: \$25.00