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Registration Section

TO:

Division of Corporations					
auristo car - CAD SOLI	JTIONS & PROJECTS USA I	1.C			
SUBJECT: CAD SOLO	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:			
	RODRIGO P SILVA				
Name of Person					
	RS ACCOUNTING AND TAX SERVICES INC				
Firm/Company					
	10 FAIRWAY DRIVE SUITE 201A				
		Address			
	DEERFIELD BEACH, FL				
	RODRIGO@RSACCOUN	City/State and Zip Code			
		to be used for future annual report no	tification)		
For further information e	oncerning this matter, please c	all:			
RODRIGO P SILVA		at (954) 623-7615			
Name o	f Person	at (<u>954</u>) <u>623-7615</u> Area Code Daytir	ne Telephone Number		
Enclosed is a check for th	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 Address		Street Address:			
Registration Section		Registration Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

CAD SOLUTIONS & PROJECTS USA LLC

NS & PROJECTS USA LLC

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

(A Florida Limited Liability Company)

SECRETARY OF STATE The Articles of Organization for this Limited Liability Company were filed on 05/09/202 TALLAHASSEE, FL and assigned Florida document number L22000217895 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NONE 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) 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 City

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 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>	Name	<u>Address</u>	Type of Action
MGR AMGR	ANGELICA DE FREITAS SANTO	9576 CYPRESS PARK WAY	= Add
		BOYNTON BEACH FL 33472	
			□ Change
			□Add
			□Remove
			Change
			□Add
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			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ANGELICA DE FREITAS SANTOS DE SOUZA E. Effective date, if other than the date of filing: (optional) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated _08/03

Typed or printed name of signee

FERNANDO CESAR DE SOUZA