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PICK-UP	☐ WAIT	MAIL
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ial Instructions to	Filing Officer:	

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legistration Section
livision of Corporations

NAMAI CABANA FLORIDA LLC

T:

Name of Limited Liability Company

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

turn all correspondence concerning this matter to the following:

LELIO YAMAO

Name of Person

51. BUSINESS CONSULTING LLC

Firm/Company

15427 SHONAN GOLD DR

Address

WINTER GARDEN, FL 34787

City/State and Zip Code

her information concerning this matter, please call:

LELIO.OFFICE@GMAIL.COM

) LUIZ CORTEZ CARDOSO	407	463-3464
	at ()) ,
Name of Person	Area Code	Daytime Telephone Number

E-mail address: (to be used for future annual report notification)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

(Name of the Lin	nited Liability Company as (A Florida Limited Liabili	it now appears on our re ity Company)	cords.)			
f Organization for this Limited	Liability Company were	e filed on 05/24/2022			and ass	ioned
nent number		.				·5·
ent is submitted to amend the fo	ollowing:					
ng name, <u>enter the new name</u>	of the limited liability	company here:				
ust be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "	LLC" or th	ac abbrevi	ച്ന "] പ	C.``
incipal offices address, if appl	icable:					
ice address MUST BE A STRE	EET ADDRESS)					
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iling address, if applicable:	_	·			_	
ess MAY BE A POST OFFICE	<u> </u>					
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ig the registered agent and/or the new registered office addr	registered office addre <u>ess h</u> ere:	ess on our records, <u>en</u>	ter the n	ame of	the new	regis
				. :	20	
					22 ¥:	
of New Registered Agent	FABIO LUIZ CORT	EZ CARDOSO				
	FABIO LUIZ CORT				- 16	
			dress	÷.,)- VC	
		ARK DR		;	DV -1 AII	; ;
e of New Registered Agent: Registered Office Address:	11527 CAMDEN PA	ARK DR	dress Florida	;	DV - Aiii Folde	, ,

ccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the of all statutes relative to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is to merely reflect a change in the registered office address, I hereby confirm that the limited liability as been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent)

red from our records:

Manager
Authorized Member

<u>Name</u>	<u>Address</u>	Type of Action
Fabio L Cortez Cardoso	11527 CAMDEN PARK DR	⊟ ∧dd
	WINDERMERE, FL 34786	□Remove
		□Change
Sergio Florentino da Silva	11327 CAMDEN PARK DR	⊟ ∆dd
	WINDERMERE, FL 34786	□Remove
		Change
amai Hospitality LLC	11527 CAMDEN PARK DR	□Add
	WINDERMERE, FL 34786	=Remove
		Change
		□∧dd
		□Remove
		□Change
		□Add
		Петоче
		□∧dd
		□Remove
		Change

nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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 (3) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
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.
CTOBER 31 , 2022 .
Signature of a member or authorized representative of a member:
FABIO LUIZ CORTEZ CARDOSO \(\rightarrow\)
Typed or printed name of signee