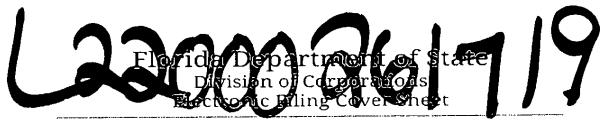
From, RUBEM SOUZA



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : 120190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

\*\*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@medeirossouza.com
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAINBOW HEART USA LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

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	gistration Sec vision of Corp			<i>*</i>
		HEART USA LLC		ş
SUBJECT:	·	Name of Limi	ted Liability Company	·
		Amendment and fee(s) are subt		
Please retur	n all correspor	idence concerning this matter t	to the following:	
		Rubem Souza		
		<del></del>	Name of Person	
		Medeiros Souza corp		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		845 N GARLAND AVE. S	TE 100	
			Address	, . , <del> ,</del>
		ORLANDO, FL 32801		
			City/State and Zip Code	<del></del>
		contact@medeirossouza.con		<del></del>
		E-mail address: (t	o be used for future annual report not	afication)
For further	information co	oncerning this matter, please ca	all:	
Rubern Sou	ıza		407 326 - \$484	
	Name of	Person	at ()	ne Telephone Number
Enclosed is	a check for the	e following amount:		
□ \$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MailingAddress:

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

StreetAddress:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

From: RUBEM SOUZA

RAINBOW HEART USA LLC			
( <u>Name of the Limited Liahility Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on and assigned and assigned		
A. If amending name, enter the new name of the limited liab	ility company here:		
A. If and doing name, there are name or the mines and			
The new name must be distinguishable and contain the words "Limited Liabit	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	845 N GARLAND AVE, STE 100		
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32801		
Enter new mailing address, if applicable:	845 N GARLAND AVE, STE 100		
(Mailing address MAY BE A POST OFFICE BOX)	ORI.ANDO, FL 32801		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter the name of the new registered		
<del></del>			
New Registered Office Address:	Enter Florida street address Florida		
New Registered Agent's Signature, if changing Registered Agent:	City Florida - 1 Zip Gode		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familially with and provided for in Chapter 605, F.S. Or, if this document is		

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:

From: RUBEM SOUZA

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ALEXANDRE LUIZ AMORIN FA	1540 INTERNATIONAL PKWY GROUP 2000, ST	E2 □Add
			<b>=</b> Remove
			□Change
AMBR	RAPHAEL PRADO ARAUJO	1540 INTERNATIONAL PKWY GROUP 2000, ST	E2 □Add
			Remove
			□Change
AMBR	BDN INVESTMENTS USA LLC	1540 INTERNATIONAL PKWY GROUP 2000, ST	
			■Remove
			□ Change
AMBR	Global Rainbow Heart LLP	845 N Garland Ave STE 100 ORLANDO FL 32801	= Add
			□Remove
			DAdd
			□Remove
			🗆 Change
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Tective date, if other than the effective date is listed, the date is	nust be specific and cannot be p	prior to date of filing or	(optional) more than 90 days after filing.)	Pursuant to 605.0207
ote: If the date inserted in this ocument's effective date on the	block does not meet the ap	oplicable statutory fil	ling requirements, this date v	rill not be listed as
record specifies a delayed effectis filed	tive date, but not an effecti	ve time, at 12:01 a n	on the earlier of: (b) The	90th day after the
ated Orlando	08/14/2	1022		
ated	·	·		
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Typed or printed name of signee