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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)504-6519

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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Help

T. LEMIEUX

MAY 1 0 2023

COVER LETTER

TO: Registration So Division of Con			ŕ
	HEART USA LLC		
SUBJECT:	Name of Lim	aited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	1.1.2.2.4.4.4.4.
	Medeiros Souza corp		
		Firm/Company	
	1711 Amazing Way, Sre 2	13	
		Address	
	Ocuce, FL 34761		
		City/State and Zip Code	
	contact@medeirossouza.co		
For firther information	E-mail address: (concerning this matter, please c	to be used for future annual report noti	fication)
Rubem Souza	oncerning this matter, please c	407 326 - 8484	
	210	at ()	P. S. A. A.
Name e	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddres</u> Registration		<u>StreetAddress:</u> Registration Se	ction
Division of C		Division of Cor	porations
P.O. Box 632		The Centre of T	
Tallahassee,	rt. 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

To:

If Changing Registered Agent. Signature of New Registered Agent

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAINBOW HEART USA LLC			
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appea	irs on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number		och otoopp	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company h	ere:	
Crediex LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the	designation "LLC" or the al	breviation "L.L.C."
Enter new principal offices address, if applicable:		-	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		No.	. 202
(Mailing address MAY BE A POST OFFICE BOX)			3
	•		
B. If amending the registered agent and/or registered office a	ddress on our	records enter the nam	e of the new registered
agent and/or the new registered office address here:	daress on our	<u> </u>	. 2
			<u>ੂੰ</u> <u>ਬ</u>
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			
New Negistered Office Address.	Enter Flo	orida street address	
		, Florida	
	Ciţy		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre 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.	performance o provided for in	f my duties, and Lam _. Chapter 605, F.S. Or,	familiar with and if this document is

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>	Address	Type of Action
			□Add
			□Remove
			ПСһапуе
			□Add
			□ Rетоус
			☐ Change
 			
			□Remove
			Change
		 	
			□Renove
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ffective date, if other than th	e date of filin	g:		(optional)	
Rective date, if other than th an effective date is listed, the date m lote; If the date inserted in this l	ist be specific and	d cannot be prior to c	ate of filing or more	than 90 days after filing.)	Pursuant to 605,0207
ocument's effective date on the	Department of :	State's records.	. Statement triming re	quitements, uns date	war not be usica as
record specifies a delayed effecti	ve date, but no	can effective time	at 12:01 a.m. on t	he earlier of (b). The	e 90th day after the
Lis filed					
Orlando		05/08/2023			
ated Orlando		•			
16-					
	Signature of a	member or authoriz	ed representative of	i member	

Typed or printed name of signee