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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H22000327633 3)))



H22000327633ABC

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : TAX ZONE INC.  
Account Number : I20190000044  
Phone : (407)888-3131  
Fax Number : (888)453-0509

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

Email Address: Accountant@taxzonefl.com

2022 SEP 23 AM 10:19

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BPE MUNDIAL LLC.

|                       |         |
|-----------------------|---------|
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| Page Count            | 07      |
| Estimated Charge      | \$25.00 |

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Corporate Filing Menu

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9/23/2022 9:53:02 AM PAGE 1/001 Fax Server



September 23, 2022

FLORIDA DEPARTMENT OF STATE  
Division of CorporationsBPE MUNDIAL LLC.  
3659 TOWN CENTER RD  
STE 130  
ORLANDO, FL 32837USSUBJECT: BPE MUNDIAL LLC.  
REF: L22000333483

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list a complete mailing address. (It appears you did not list the corresponding "P.O. BOX" number for the mailing address.

If you have any further questions concerning your document, please call (850) 245-6939.

Jalesa S Dennis  
Regulatory Specialist III  
Internet SupportFAX Aud. #: H22000327633  
Letter Number: 822A00021222

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BPE MUNDIAL LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

ED KOTLER

Name of Person

TAX ZONE INC

Firm/Company

8865 COMMUNITY CIR STE 4

Address

ORLANDO, FL 32819

City/State and Zip Code

ACCOUNTANT@TAXZONEFL.COM

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

For further information concerning this matter, please call:

ED KOTLER

407 888-3131  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

Enclosed is a check for the R

☐ \$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:

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

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2022 SEP 23 AM 10:19

TALLAHASSEE, FL

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

BPE MUNDIAL LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/28/2022 and assigned  
Florida document number L22000333483

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8100 CRYSTAL CLEAR LN

ORLANDO, FL 32809

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 130

3956 TOWN CENTER BLVD.

ORLANDO, FL 32835

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: BELLA IRIS ACOSTA RAMOS

New Registered Office Address: 8100 CRYSTAL CLEAR LN

Enter Florida street address

ORLANDO, FL

Florida 32809

City

Zip Code

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.

1111 N. M... Suite 310  
32803

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager  
AMBR = Authorized Member

| Title                             | Name                    | Address               | Type of Action                             |
|-----------------------------------|-------------------------|-----------------------|--------------------------------------------|
| AMBR                              | BELLA IRIS ACOSTA RAMOS | 8100 CRYSTAL CLEAR LN | <input type="checkbox"/> Add               |
|                                   |                         | ORLANDO, FL 32809     | <input type="checkbox"/> Remove            |
|                                   |                         |                       | <input checked="" type="checkbox"/> Change |
|                                   |                         |                       | <input type="checkbox"/> Add               |
|                                   |                         |                       | <input type="checkbox"/> Remove            |
|                                   |                         |                       | <input type="checkbox"/> Change            |
|                                   |                         |                       | <input type="checkbox"/> Add               |
|                                   |                         |                       | <input type="checkbox"/> Remove            |
|                                   |                         |                       | <input type="checkbox"/> Change            |
|                                   |                         |                       | <input type="checkbox"/> Add               |
| Registered Agent:                 | BELLA IRIS ACOSTA RAMOS |                       | <input type="checkbox"/> Remove            |
| Office / Home                     | 8100 CRYSTAL CLEAR LN   |                       | <input type="checkbox"/> Change            |
| City / State / Zip                | ORLANDO, FL 32809       |                       | <input type="checkbox"/> Add               |
| Signature, if required            |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Signature                 |                         |                       | <input type="checkbox"/> Change            |
| Agent's Title                     |                         |                       | <input type="checkbox"/> Add               |
| Agent's Email                     |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Phone                     |                         |                       | <input type="checkbox"/> Change            |
| Agent's Fax                       |                         |                       | <input type="checkbox"/> Add               |
| Agent's Website                   |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Social Media              |                         |                       | <input type="checkbox"/> Change            |
| Agent's Other                     |                         |                       | <input type="checkbox"/> Add               |
| Agent's Notes                     |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Comments                  |                         |                       | <input type="checkbox"/> Change            |
| Agent's History                   |                         |                       | <input type="checkbox"/> Add               |
| Agent's Status                    |                         |                       | <input type="checkbox"/> Remove            |
| Agent's License                   |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration                |                         |                       | <input type="checkbox"/> Add               |
| Agent's Renewal                   |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Transfer                  |                         |                       | <input type="checkbox"/> Change            |
| Agent's Deletion                  |                         |                       | <input type="checkbox"/> Add               |
| Agent's Restoration               |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Revocation                |                         |                       | <input type="checkbox"/> Change            |
| Agent's Reinstatement             |                         |                       | <input type="checkbox"/> Add               |
| Agent's Suspension                |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Voluntary Surrender       |                         |                       | <input type="checkbox"/> Change            |
| Agent's Involuntary Surrender     |                         |                       | <input type="checkbox"/> Add               |
| Agent's Annulment                 |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Rescission                |                         |                       | <input type="checkbox"/> Change            |
| Agent's Voidance                  |                         |                       | <input type="checkbox"/> Add               |
| Agent's Invalidity                |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Unenforceability          |                         |                       | <input type="checkbox"/> Change            |
| Agent's Breach                    |                         |                       | <input type="checkbox"/> Add               |
| Agent's Default                   |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Non-Performance           |                         |                       | <input type="checkbox"/> Change            |
| Agent's Failure to Perform        |                         |                       | <input type="checkbox"/> Add               |
| Agent's Incomplete Performance    |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Partial Performance       |                         |                       | <input type="checkbox"/> Change            |
| Agent's Substantial Performance   |                         |                       | <input type="checkbox"/> Add               |
| Agent's Complete Performance      |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Acceptance                |                         |                       | <input type="checkbox"/> Change            |
| Agent's Rejection                 |                         |                       | <input type="checkbox"/> Add               |
| Agent's Withdrawal                |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Termination               |                         |                       | <input type="checkbox"/> Change            |
| Agent's Cancellation              |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry                    |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration                |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Date               |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Date           |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Period             |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Period         |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Term               |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Term           |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Condition          |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Condition      |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Event              |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Event          |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Trigger            |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Trigger        |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Cause              |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Cause          |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Reason             |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Reason         |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Justification      |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Justification  |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Explanation        |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Explanation    |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Detail             |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Detail         |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Information        |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Information    |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Data               |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Data           |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Record             |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Record         |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Log                |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Log            |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry History            |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration History        |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Summary            |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Summary        |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Overview           |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Overview       |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Snapshot           |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Snapshot       |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Screenshot         |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Screenshot     |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Printout           |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Printout       |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Document           |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Document       |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Certificate        |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Certificate    |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Receipt            |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Receipt        |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Acknowledgment     |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Acknowledgment |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Confirmation       |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Confirmation   |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Verification       |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Verification   |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiry Validation         |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiration Validation     |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiry Confirmation       |                         |                       | <input type="checkbox"/> Change            |
| Agent's Expiration Confirmation   |                         |                       | <input type="checkbox"/> Add               |
| Agent's Expiry Confirmation       |                         |                       | <input type="checkbox"/> Remove            |
| Agent's Expiration Confirmation   |                         |                       | <                                          |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

PLEASE ADD EIN NUMBER: 88-3617958

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TALLAHASSEE, FL

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

E. Effective date, if other

(If an effective 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)(b),

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(S) document's effective date on the Department of State's records.

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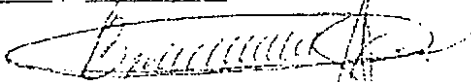
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Date: SEP 21 IRIS, 2022

SEP 21 IRIS, 2022



Signature of a member or authorized representative of a member

BELLA IRIS ACOSTA RAMOS

Typed or printed name of signee