-07/3/2024 07:26 PM TO:18506176383 FROM: 4079449857 Page:

> 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.

> > (((H24000228896 3)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : YOBI TECHNOLOGY, LLC

Account Number : I20200000112 : (407)351-6656 Fax Number : (407)612-2313 ELECTION TO THE OF

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

Email Address: ACCT @ EXCELTOTAL BUSINESS. COM

## LC AMND/RESTATE/CORRECT OR M/MG RESIGN MENDANHA ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

K. SALY

JUL - 9 2024

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## **COVER LETTER**

	gistration Sec vision of Corp			
SUBJECT		IA ENTERPRISES LLC		
SUBJECT		Name of Lin	nited Liability Company	···
The enclose	ed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please retur	n all correspoi	ndence concerning this matter	to the following:	
		ANTONIO CARDOSO		
			Name of Person	
		EXCEL TOTAL BUSINE	SS	
			Firm/Company	<del>_</del> ·
		7575 KINGSPOINTE PK	WY SUITE#2	
			Address	
		ORLANDO, FL 32819		
			City/State and Zip Code	
		ACCT@EXCELTOTALBU	JSINESS.COM to be used for future annual repo	
For further i	information co	neerning this matter, please c	· ·	a notification)
ANTONIO	CARDOSO		407 832-72 at()	
, , , , , , , , , , , , , , , , , , ,	Name of	Person	Area Code D	aytime Telephone Number
Enclosed is	a check for the	following amount:		
<b>S</b> \$25.00	Filing Fec	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed	Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Address gistration S		<u>Street Addre</u> Registratio	
	vision of Co			Corporations
	D. Box 6327			of Tallahassee

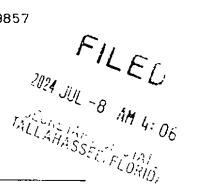
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



MENDANHA ENTERPRISES, 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 Florida document number L22000397256		were filed on	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		5336 OLD WINTER GARDEN ROAD, STE#11	
(Principal office address MUST BE A STRE	ET ADDRESS)	ORLANDO, FL 32811	
		- <del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7575 KINGSPOINTE PKWY STE#2 ORLANDO, FL 32819	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office : ess here:	address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street o	ddress
	N/A		, Florida N/A
		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.

If Changing Registered Agent, Signature of New Registered Agent

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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	Address	Type of Action
MGR	Leonardo de Souza Mendanha	12008 Angle Pond Ave	■ Add
		Windermere, FL 34786	□ Remove
			□Change
MGR	Washington Mendanha Ramos	7575 Kingspointe Pkwy Ste#2	
		Orlando, FL 32819	Remove
			: Change
			□Add
			是可以 是 是
			Add la Remove
			DAdd 1 Change O
-			□Add
			□Remove
			[]Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
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	FLOWING OF
<u> </u>	
***************************************	
07/ E. Effective date, if other than the date of filing:	/03/2024
(If an effective date is listed, the date must be specific and cannot	(optional) a be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (2) the applicable statutory filing requirements, this date will not be listed as the records.
if the record specifies a delayed effective date, but not an effectored is filed.	fective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated Orlando, July 03rd 202-	<del>1</del>
	Mus.
Signature of a member	or authorized representative of a member
ANITONI	IO CARDOSO - REGISTER AGENT

Filing Fee: \$25.00

Typed or printed name of signee