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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 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. contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DREAM TRIP USA LLC

Certificate of Status	1
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MAR 2 1 2023 T. LEMIEUX Registration Section

TO:

COVER LETTER

Division of Cor	porations				
Dream Trip SUBJEC'T:	USA LLC				
	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.			
Please return an correspo	ondence concerning this matter	to the following:			
	Rubem Souza				
		Name of Person	· · · · · · · · · · · · · · · · · · ·		
	MEDEIROS SOUZA COI	יוא			
		Firm/Company			
	1711 Amazing Way, Ste 2	13			
		Address			
	Ococc, FL 34671				
		City/State and Zip Code			
	Contact@medeirossouza co				
	E-mail address: (to be used for future annual report n	otification)		
For further information c	oncerning this matter, please c	all:			
Rubem Souza		407 326-8484			
Name o	t Person	at () Area Code Dayt	ine Felephone Number		
Enclosed is a check for the	ne fallowing amount:				
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	S55.00 Filing Fee &	☐ \$60.00 Filing Fee.		
3.5.00 Timig rec	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy radditional copy is enclosed;		
MailingAddress:		StreetAddress:			
Registration S		Registration Section Division of Corporations			
Division of C P.O. Box 632		Division of C The Centre of			
Tallahassee, l			roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dream Trip USA LLC				
(Name of the Lin	rited Liability Company as it now appears (A Florida Limited Exability Company)	on our records,)		
The Articles of Organization for this Limited Florida document number 1.23000026490	Liability Company were filed on $\frac{0.1/26}{1}$	0/2023	andassigned	
This amendment is submitted to amend the fo	Howing:			
A. If amending name, enter the new name	of the limited liability company here	<u>:</u>		
The new name must be distinguishable and contain the		gnation "LLC" at the abbrevi	ation "L.L.C."	
Enter new principal offices address, if appl	icable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u></u>	2023 2023	
			-:	
			.)	
B. If amending the registered agent and/or	••	ords, <u>enter the name of</u>	the new register	
agent and/or the new registered office addr	<u>ess here</u> :			
Name of New Registered Agent:	MEDEIROS SOUZA CORP	-	.;	
manie of New Registered Agent.		-	<u> </u>	
New Registered Office Address:	845 N GARLAND AVE, STE 100			
	Enter Florida street address			
	ORLANDO	Florida <u>328</u> 01		
	Ciţ:	7.	ip 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 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

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rubiafran da Silva Santos	429 JORDAN STUART CIR APT 101	
		APOPKA, FL 32703	≡ Remove
			□Change
		<u> </u>	
			Remove
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From: RUBEM SOUZA

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tlf an eft <u>Note:</u>	tive date, if other than the confective date is listed, the date must be all the date inserted in this blooment's effective date on the Dep	e specific and k does not m	cannot be prior t neet the applica	o date of filing o	r more than 90 day	(optional) s after filing.) Pursu s, this date will n	ant to 605,0207 C of be listed as th
he recor ord is fi	rd specifies a delayed effective filed	date, but not	an effective to	ne, ar 12 fil a i	m on the earlier	of (h) The प्रीक्ष	day after the
Dated	ORLANDO		03,16,2023				
1711111	0 \	·					

Typed or printed name of signee