## LZ3000083056

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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## **COVER LETTER**

.,	Corporations		
P.R. AU	ЛО CAR LLC		
SUBJECT:			
P.R. AUTO CAR LLC    Name of Limited Liability Company			
Please return all corre	espondence concerning this matter	to the following:	
	AURELIO NETO		
		Name of Person	
·	ONE TOUCH CONSULT	ING SERVICES LLC	
		Firm/Company	
	7345 W SAND LAKE RE	D. STE 224	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
			<u></u>
			neation)
For further informatic	on concerning this matter, please c	all:	
AURELIO NETO		407 233-7350	
Nan	ne of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	or the following amount:		
<b>■</b> \$25.00 Fiting Fee		Certified Copy	Certificate of Status & Certified Copy (additional copy is enclosed)
Registration Division of P.O. Box 6	on Section f Corporations	Registration Sec Division of Cor The Centre of T	etion 20 morations

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

P.R. AUTO CAR LLC		
( <u>Name of the Limited Liability (</u> (A Florida Lii	Tompany as it now appears on our record mited Liability Company)	<u>ls.</u> )
The Articles of Organization for this Limited Liability Com Florida document number 1.23000083056	npany were filed on 02/15/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
PONTES & COSTA INVESTMENTS LLC		
the new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	55)	
		17
Enter new mailing address, if applicable:		- ) 28
Mailing address MAY BE A POST OFFICE BOX)		P
Tuting uturess MAT BE ATOST OFFICE BOAJ		
		52
3. If amending the registered agent and/or registered of gent and/or the new registered office address here:	ffice address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	D (2)	
	Hiability Company here:    Liability Company   the designation "L.L.C."	
	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

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
AMBR	PABLO ROBERTO PONTES COS	15324 STARLEIGH RD WINTER GARDE, FL 347	87 □Add
			≣Remove
			🗆 Change
AMBR	ELAINE CRISTINA DOS SANTO	15324 STARLEIGH RD WINTER GARDE, FL 347	87 □Add
			\in Remove
			<del>-</del>
AMBR	DEBORA GONCALVES PONTES	15324 STARLEIGH RD WINTER GARDE. FL 347	27. 10 Aug
		<del></del>	_ □Remove
			_ Change
AMBR	LAURA CONCALVES PONTES (	15324 STARLEIGH RD WINTER GARDE, FL 347	87 ■Add
			□Remove
			□Change
		<del></del>	□Add
			🗀 Remove
			Change
			□Add
			□Remove
			□Change

- CHANGE COMPANY'S NAY	ME			
- REMOVE MEMBER: PABLO	O ROBERTO PONTES COSTA			_
- REMOVE MEMBER: ELAIN	E CRISTINA DOS SANTOS			_
- ADD MEMBER: DEBORA C	GONCALVES PONTES COSTA			_
- ADD MEMBER: LAURA CO	ONCALVES PONTES COSTA			_
				_
				_
				_
				)
				ਹ ਹ
	•			<del></del>
n effective date is listed, the date must be	2 specific and cannot be prior to date of control does not meet the applicable state	(optional) of filing or more than 90 days after filing atutory filing requirements, this date	.) Pursuant to t	<b>€</b> 5.020 isted a
ecord specifies a delayed effective d is filed.	ate, but not an effective time, at	12:01 a.m. on the earlier of: (b) Th	ie 90th day a	fter th
JUNE 6th	2024			
Dana Dala	orto Perter of a member or authorized re			

Filing Fee: \$25.00