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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)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 PRO BUILD 3D LLC

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Help

Registration Section

TO:

From RUBEM SOUZA

COVER LETTER

Division of Co	rperations		
PRO BUIL	LD 3D LLC		
SUBJECT:	Nume of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Rubem Souza		
		Name of Person	
	Medeiros Souza corp		
		Firm/Company	
	1711 Amazing Way, Ste 2	13	
		Address	
	Ococc, FL 34761		
		City/State and Zip Code	
	contact@medeirossouza.co		
For Control in Consult		to be used for future annual report notification)	
	concerning this matter, please c		
Rubem Souza		407 326 - 8484 at ()	
Name o	of Person	at ()	one Number
Enclosed is a check for ti	he following amount:		
S25,00 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)
MailingAddres Registration 5		StreetAddress: Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

To: . Page: 5 of 7 2023-05-24 14:33:08 GMT 14076046519 From: RUBEM SOUZA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	it ed Liability Cor (A Florida Limit	npany as it now app ed Liability Company	ears on our records.)	
The Articles of Organization for this Limited I Florida document number	Liability Compa	nny were filed on _	02/23/2023	andassigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited 1	iability company	here:	
The new name must be distinguishable and contain the	words "Limited Li	ability Company," th	e designation "LLC" or	the abbreviation HolC."
Enter new principal offices address, if appli	cable:			23:
(Principal office address MUST BE A STRE.	ET ADDRESS,			2:
Enter new mailing address, if applicable:		•		1.00
(Mailing address MAY BE A POST OFFICE BOX)				:1;2
B. If amending the registered agent and/or agent and/or the new registered office addragent and/or the new Registered Agent:	_		records, <u>enter the</u>	name of the new regi
	1711 Amazi	ng Way Ste 213		
New Registered Office Address:			lorida street address	
	Осоее		Florid	da 34761
		Cin		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

Title	Name	Address	Type of Action
AMBR	FIAA LLC	1711 AMAZING WAY, STE 213	□Add
		OCOEE, FL 34761	Remove
AMBR	SPOT GLOBAL CORP	13660 CHAUVIN AVE, ORLANDO, FL 32827	■Add
			□Remove
		 	Change
			🗆 Add
			□Remove
			Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			☐ Change

From: RUBEM SOUZA

. If amending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)	
-	· • • • • • • • • • • • • • • • • • • •	
		···
		
		·
		
		
(If an effective date is listed, the date mu	the date of filing:	
he record specifies a delayed effecti ord is filed	ive date, but not an effective time, at 12.01 a.m. on the earlier of: (b). The 90	th day after the
Dated Orlando	05/24/2023	
	Signature of a member or authorized representative of a member	
Rubem Souza		
	Typed or printed name of signee	