5/29/24, 12:57 PM



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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ITAX GROUP, LLC Account Number : I20140000115

Phone

: (813)882-8426

Fax Number

: (813)884-0263

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

Email Address: brucefiel@hotmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MNV BRICK & TILE LLC

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COVER LETTER

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
MNV BRIG	ÇK & TILE LLC		
SUBJECT: ₫	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	REGINALDO MACHADO	O NETO	
		Name of Person	
	MNV BRICK & TILE LL	C	
		Firm/Company	
	12430 LAKEVIEW DR #0	01	
		Address	
	DADE CITY, FL 33525		
		City/State and Zip Code	
	brucefiel@hotmail.com		
- 4		to be used for future annual report not	lication)
For further information c	oncerning this matter, please co	all:	
REGINALDO MACHADO NETO		727 303-2447 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration Section Division of Corporations		Registration Se	
P.O. Box 6327		Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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MNV BRICK & TILE LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Cor	w appears on our records.) ompany)
The Articles of Organization for this Limited I Florida document number 1.23000243289	Liability Company were filed	d on 05/17/2023 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability comp	pany here:
The new name must be distinguishable and contain the	words "Limited Liability Compan	ny," the designation "LLC" or the abbreviation "L L C"
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		5
	 	(5-5) -6-
Enter new mailing address, if applicable:		三
		29 ;
(Mailing address MAY BE A POST OFFICE	<u></u>	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or agent and/or the new registered office address.		n our records, enter the name of the ew registered
Name of New Registered Agent:	MACHADO NETO, REG	GINALDO
New Registered Office Address:	12430 LAKEVIEW DR #0	
	E	Inter Florida street address
	DADE CITY	, Florida ³³⁵²⁵
	City	Zıp 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

DocuSign Envelope ID: 6067B1A4-E91E-4EC8-BB16-498F0003BD6B ri amenung Authorized rerson(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	MACHADO. EWANA F	12430 LAKEVIEW DR #01	□Add
		DADE CITY. FL 33525	■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
			Change

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		<u> </u>		
			-	
				
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2. Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the De	t be specific and cannot be prio ock does not meet the appli	cable statutory filing re		
the record specifies a delayed effective cord is filed	e date, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90	oth day after the
Dated MAY 28th	2024	·		
(Price				
	Signature of a member or auth	norized representative of a	a member	
REGINALDO MACHA				
	Typed or prin	ted name of signee		

Filing Fee: \$25.00