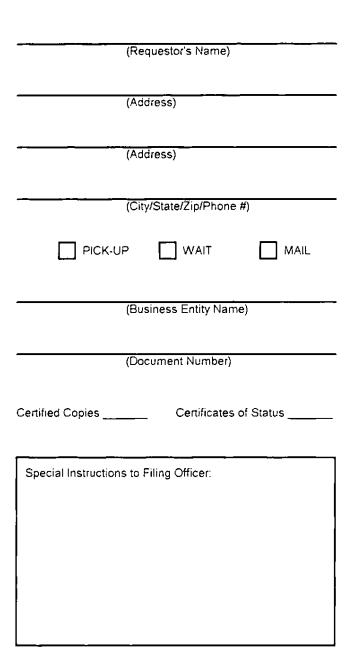
125000 263 459



Office Use Only





700424212417

72/25/24--01000-4064 ••25.00

2024 FEB 20 PM 3: 00

COVER LETTER

TO: Registration Se Division of Cor					
DTAULA	DPAULA INVESTIMENTS LLC				
SUBJECT:	Name of Lin	nited Liabibty Company			
The enclosed Articles of	Amendment and feets) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JOSE A DE OLIVEIRA J				
		Name of Person			
	D'PAULA INVESTMEN				
		Firm'Company			
	3525 FOREST RIDGE LA	ANE			
	····	Address			
	KISSIMMEE.FL.34741				
		City/State and Zip Code	;		
	DPAULAINVESTMENTS				
For further information c	E-mail address: 0	to be used for future annual report not all:	Hication)		
JOSE A DE OLIVEIRA	JK	978 774-670-86			
Name of Person		Area Code Daytin	ne Felephone Number		
I uglosed is a check for the	ne following amount:				
➤ \$25,00 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)		
<u>Mailing Addres</u> Registration S		Street Address: Registration Se	ection		
Division of Corporations		Division of Corporations			
P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monro	Fallahassee be Street, Suite 810		

Tallahassee, FL 32303

MONEY ONDER # 19-590627733

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D'PAULA INVESTIMENTS LLC		
(Name of the Limited Liability Compa (A Florida Lumted	ny as <mark>it now appears on our records.</mark> Liability Company)	l .
The Articles of Organization for this Limited Liability Company	were filed on 05/30/2023	and assigned
Horida document number 1.23000263459		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liah</u>	ility company here:	
DPAULA INVESTMENTS LLC		
The new name must be distinguishable and contain the words "Limited Liabi	hty Company," the designation "LLC"	or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		202
Principal office address MUST BE A STREET ADDRESS)		三
		8 -
		52 ° m
Enter new mailing address, if applicable:		PH PH
Mailing address MAY BE A POST OFFICE BOX)		
		00
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter tl</u>	ne name of the new registere
<u> </u>		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
**	Flor	ida
	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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

			[]Remove
			□Change

			ElRemove
			Change
			□Remove
			□Change

H ame	nding any other inform:	man, enter ci	range(s) nere	с: (мниси ий	шинтки мес	is, y necessi	<i>u</i> ,,,,	
			··		·····			-
-								-
								_
								_
_								-
-								-
								_
_								_
			<u> </u>					
								_
						<u> </u>		-
			· -					-
_						·		-
							,,,, ,	_
_								·-
**							· · · · · · · · · · · · · · · · · · ·	-
Note:	ve date, if other than the ective date is listed, the date mo If the date inserted in this b ent's effective date on the f	lock does not n	neet the applic	able statutory	or more than 9 filing require	(option: 0 days after fili ments, this da	il) ng.) Pursuant to 60 ite will not be lis	5.0207 (3 ted as th
be record and in fil	I specifies a delayed effectived.	re date, but not	an effective ti	ime, at 12:01 a	ian, on the ea	rlier of: (b)	The 90th day after	er the
Dated	FEBRUARY 5TH		2024		_			
		Signature of a r		orized represent	97	bor		
		e Signature of a r	ucmograpi auth	onzeg represent	iauve ora mem	UC I		
			V	\mathcal{O}				

Filing Fee: \$25.00