To:



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000253872 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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.

Email Address:____caioanc12@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STRONG TOWER INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

7NF 5 1 5053 T. LEMidįbirt TO:

From: RUBEM SQ

COVER LETTER

	tion Section of Corporations	
SPRO SUBJECT:	ONG TOWER INVESTMENTS L	
SUBJECT:	Name of L	imited Liability Company
The enclosed Artic	eles of Amendment and fee(s) are s	ubmitted for filing.
Please return all co	orrespondence concerning this matt	er to the following:
	Caio Alexandre Nunes C	Cumargo
		Name of Person
	FDED INVESTMENTS	LLC
		Firm/Company
	12803 westside village l	оор
		Address
	windermere/florida 3478	\$6
	-	City/State and Zip Code
	caioanc12@gmail.com	
	E-mail address	c: (to be used for future annual report notification)
For further informa	ation concerning this matter, please	eall:
Caio Alexandre No	unes Camargo	407 7640930 at ()
,	Same of Person	Area Code Daytime Telephone Number
Enclosed is a check	k for the following amount:	
■ \$25.00 Filing I	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy radditional copy is enclosed) ☐ \$60.00 Filing Fee, Certified Copy radditional copy is enclosed
<u>MailingA</u> Registra		StreetAddress: Registration Section
Registration Section Division of Corporations		Division of Corporations
P.O. Box	x 6327	The Centre of Tallahassee
Tallahas	see, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STRONG TOWER INVESTMEN	TS LLC		
(Name of the Limi	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited I Florida document number <u>L23000295671</u>	iability Company were filed on JUI	NE/19/2023	_ and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name (of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the abbro	viation "L.L.C."
Enter new principal offices address, if applie	eable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
		.	
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		<u></u>
			\\ \frac{2}{3} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
B. If amending the registered agent and/or	registered office address on our re	ecords, enter the name o	f the new registered
agent and/or the new registered office addre	<u>ss here</u> :		O r
Name of New Registered Agent:	Caio Alexandre Nunes Camargo	<u> </u>	图
New Registered Office Address:	12803 westside village loop		
	Enter Flori	ida street address	10
	Windermere	Clarida 34780	5

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name	Address	Type of Action
MGR	A&C INVESTMENTS LLC	12803 Westside village loop	□Add
			■ Kemove
			□ Change
MGR A&C FIVE INVESTMENTS LLC	12803 Westside village loop	■Add	
		□Remove	
		 	□Change
			□Remove
			☐ Change
		🗖 Add	
		□Remove	
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□("hange

To:

D. If amending any other informatio	on, enter change(s) here: (Attach additional sheets, if necessary.)
	
E. Effective date, if other than the dattle an effective date is fisted, the date must be Note: If the date inserted in this block document's effective date on the Department.	ate of filing:(optional) e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)th k does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
f the record specifies a delayed effective decord is filed	date, but not an effective time, at 12.01 a.m. on the earlier of (b). The 90th day after the
Dated	
Int.	, ~
Sig	gnature of a member or authorized representative of a member
FDED INVESTMENTS L	LC Typed or printed name of signee

Filing Fee: \$25.00