

**L23000305099**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : JSD & COMPANY PA  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: brunamoura.usa@gmail.com

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2025 JAN 31 PM 5:25  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CHICLE USA LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
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K. SALY

JAN 31 2025

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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2025 JAN 31 PM 5:25

FALLAHASSE, FLORIDA

CHICLE USA LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/26/2023 and assigned  
Florida document number L23000305099.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

SIGNATURE TRADE BROKERS 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 ADDRESS)**

3343 Port Royale Dr S

Apt 235

Fort Lauderdale, FL 33308

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

3343 Port Royale Dr S

Apt 235

Fort Lauderdale, FL 33308

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

BRUNA CONDE DA SILVA MOURA

New Registered Office Address:

3343 Port Royale Dr S Apt. 235

Enter Florida street address

Fort Lauderdale


Florida 33308

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	BRUNA CONDE DA SILVA MOURA	3343 Port Royale Dr S Apt. 235	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BRUNA CONDE DA SILVA MOURA	2100 SW 8TH ST UNIT 347	<input type="checkbox"/> Add
		MIAMI, FL 33135	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

N/A

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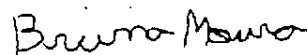
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JANUARY 31, 2025

\_\_\_\_\_  
Signature of a member or authorized representative of a member

BRUNA CONDE DA SILVA MOURA

\_\_\_\_\_  
Typed or printed name of signee

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