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12/15/23, 11:28 AM

Division of Corporation

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.

(((H23000427665 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CKO CONSULTING AND TAX SERVICES LLC

Account Number : I20220000100 Phone : (321)366-0510 Fax Number : (321)366-0511

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MONTEIRO CALDAS SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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Help

T. LEMIEUX

ge: 3 1271572	2023 03:47 PM	TO:18506176383 FROM:3213	3660511
		COVER LETTER	1
TO: Registration Sec			
Division of Corp	orations		
SUBJECT #	MONTEIRO C	ALDAS SERVICES ELC	
-	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	CRISTIANE OLIVEIRA	A SILVA	
		Nume of Person	
	CKO CONSULTING A	ND TAX SERVICES LLC	
		Firm/Company	
	7065 WESTPOINTE BI	.VD STE 303	
		Address	
	ORLANDO - FL - 3471	1	
	(150,0010,0001	City/State and Zip Code	
	C'EO@CKOACCOUNT	INGSERVICES.COM to be used for future annual report notification)	
For further information co	ncerning this matter, please c	•	
	•		
CRISTIANE OLIVEIR		321 366 0510	
Name of	Person	Area Code Daytime Telephone N	umber
Enclosed is a check for the	following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy (additional copy is enclosed) Certified Certified Certified Certified Certified Certified Copy (additional copy is enclosed)	.00 Filing Fee, rtificate of Status & rtified Copy litional copy is enclosed)
Mailing Address Registration S	-	Street Address: Registration Section	
Division of Co	prporations	Division of Corporations	
P.O. Box 6327 Tallahassec, F		The Centre of Tallahassee 2415 N. Monroe Street, Su	site 810

1/32 m 437665 2 MC-

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MONTEIRO CALDAS SERVICES 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	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the na	me of the new regist
	e e esti
Name of New Registered Agent:	₹3 *} 3
Name of New Registered Agent: New Registered Office Address:	
Name of New Registered Agent:	ت ال

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

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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>	Address	Type of Action
AMBR	LUCAS MONTEIRO CALDAS	8977 SHINE DR - KISSIMMEE - FL - 34747	□Add
			🖩 Remove
			□Change
			□Add
			🗆 Remove
			□Change
			UAdd
			□Remove
			Change
			□Add
			□Remove
			
			□Remove
			□ Change
			□Remove
			Change

42300 42766520862

HAIN	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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HOLE.	the date, if other than the date of filing: cetive 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 1005.0207 (3). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he record ord is fil	d 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 ed.
Dated	DECEMBER 15th 2023
	Library Vilong What vib
	FABIANY URBANO MONTEIRO
	Typed or printed name of signer

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Filing Fee: \$25.00

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