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.

(((H24000382064 3)))



H240003820543ABCS

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 : ELO ENTERPRISES, INC

Account Number : I20150000109 Phone : (561)544-8862 Fax Number : (954)697-0130

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

sales(w)eloenterprises.us Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DSA INCORPORATION LLC

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

Electronic Filing Menu Corporate Filing Menu

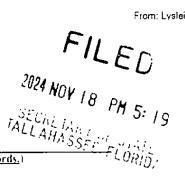
Help

K. SALY

NOV 19 2024

From: Lyslei Chirico

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



DSA INCORPORATION 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 Co Florida document number L23000560995		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here: KAELIN DO BRASIL PARTICIPACOES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 name of the new registered		
		"LLC" or the abbreviation "L.L.C."
	ed stating company, the designation	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	<u></u>	
Enter new mailing address, if applicable:	***************************************	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office adoress on our records, e	nter the hame of the new registered
Name of New Registered Agent:		
N		
New Registered Office Address:	Enter Florida street a	ldress
		Morida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and con accept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my dutic ent as provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

To: 1 Sunbiz Emende 6383 Page: 3 of 4 2024-11-18 15:43:23 GMT From: Lyslei Chirico

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	KELLY CRISTINA VIDAL BARROSO	4700 NW BOCA RATON BLVD #202	■Add
		BOCA RATON, FL 33431	□Remove
			□ Change
			Add
			Repove 7
			Add Add Change Change Signature Change Change
			(F) del (S)
			□ Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□ Change
			□ Add □Remove
			□Change

N/A				
				
			TAKE THE	7
			7.	
				
			35.	-0 <u>.</u>
			T	PM 5:
•••	·_··			
				. ب
		<u> </u>		

			······	
		·		
- <u> </u>				
fective date, if other than the date must be	ite of filing:	to date of filing or more than	(optional)	x 605 0207 i
ote: If the date inserted in this bloc	k does not meet the applica	ible statutory filing requir	ements, this date will not be	e listed as (
ocument's effective date on the Dep	artment of State's records.			
ecord specifies a delayed effective c is filed.	ate, but not an effective til	ne, at 12:01 a.m. on the e	arlier of: (b) The 90th day	after the
NOVEMBER 13th	2024			
ited	• •	<u> </u>		
	min in the barrosu (Nov 16, 202-			
	the barress (bour 16, 202)	: 12 32 GMT-3:		

Typed or printed name of signee