L24000073603

(Requestor's Name)
(Address)
(Address)
(ideases)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duniana Fatty Mana)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

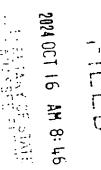
Office Use Only



100437774311

LLC Amenl

10/16/24~-01012--019 **25.00



A RAMSEY

COVER LETTER

.

TO:

TO: Registration S Division of Co				
	O ONE LLC			
SUBJECT:	Name of Lin	ited Liability Company	 	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	MARCELO AUGUSTO I	ROCHA LIMA		
		Name of Person		
	B2BUILD ONE LLC			
		Firm/Company		
	15741 SWEET LEMON V	VAY		
		Address		
	WINTER GARDEN, FL.	34787		
		City/State and Zip Code		
	limarcelo01@gmail.com			
	E-mail address: (to be used for future annual report not	ification)	
For further information	concerning this matter, please c	all:		
MARCELO LIMA		407 284-8788 at ()		
Name	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for	the 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 tadditional copy is enclosed)	
Mailing Addre Registration		<u>Street Address:</u> Registration Se	vetion	
-	Corporations	Division of Co		
P.O. Box 63			The Centre of Tallahassee	
Tallahassee.	FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

B2BUILD ONE LLC

2024 OCT 16 AM 8: 46

(Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on _______ and assigned ______ and assigned Florida document number L24000073603 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 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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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>	Address	Type of Action
AMBR	AUGUSTO ROCHA LIMA, MARCELO	15741 SWEET LEMON WAY WINTER GARDEN, FL 34787	□Add
			Remove
AMBR	SPINDOLA ROCHA LIMA, CRISTIANE C	15741 SWEET LEMON WAY WINTER GARDEN, FL 34787	□Add
			≅Remove
			□Change
AMBR	SWEET LEMON HOMES LLC	15741 SWEET LEMON WAY WINTER GARDEN, FL 34787	≅ Add
			□Remove
			□Change
AMBR	SELLAU STORE LLC	15624 MURCOTT HARVEST LOOP WINTER GARDEN, FL 34787	= Add
			□Remove
			□Change
AMBR	CTO EXPRESS LLC	1398 CORONADO RD WESTON, FL 33327	■Add
			□Remove
			□Change
AMBR	EC EMPREENDIMENTOS CORP.	15741 SWEET LEMON WAY WINTER GARDEN, FL 34787	■Add
			□Remove
			□ Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
-	
_	
_	
f an effe Note:	octional) octive date, if other than the date of filing: octive 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 lift the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
record d is file	I 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 _	OCTOBER 01 2024
	Signature of a member of authorized representative of a member