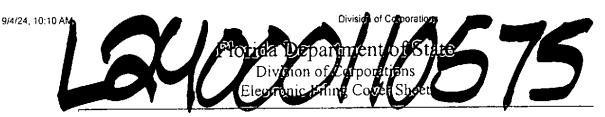
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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ATHENA BUSINESS AND TAX ADVISORS LLC

Account Number : I20230000123 Phone : (407)777-2501

Fax Number : (407)777-2502

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

Email Address: Manager adhimataxadilisars. um

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BNTO MILANO LLC

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				COVER LETTER	, ,	
Т	O:	Registration Se Division of Cor			:	
		BNTO MIL			,	
S	UBJE	СТ:	Name of	Limited Liability Company	<u>, , , , , , , , , , , , , , , , , , , </u>	
Т	he enc	losed Anicles of	Amendment and fee(s) are	submitted for filing.		
Р	lease n	eturn ali correspo	ndence concerning this ma	atter to the following:		
			ANDREIA GUIMAR			
	Name of Person					
	ATHENA BUSINESS AND TAX ADVISORS LLC					
			Firm/Company			
			7680 UNIVERSAL BLVD STE 100			
	Address					
	ORLANDO, FL 32819					
	City/State and Zip Code					
			manager@athenataxad		and astification)	
r	E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:					
A	NDRE	EIA GUIMARAE 		407 777- at ()		
		Name of	Person	Area Code	Daytime Telephone Number	
Eı	nclosed	l is a check for th	e following amount:			
i	≡ \$25.	.00 Filing Fee	S30.00 Filing Fee & Certificate of Statu		S60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is encl	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee Page: 5 109/4/2024 10:12 AM TO:18506176383 FROM:4079449857

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BNTO MILANO LLC			
(Name of the Limit	ed Liability Company as it now a (A Florida Limited Liability Comp	ippears on our records,) cary)	
The Articles of Organization for this Limited I. Florida document number 4.24000 (10575)		on <u>03/04/2024</u>	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability compa	ny here:	
The new name must be distinguishable and contain the v	vords "Limited Liability Company,"	"the designation "LLC" or th	ne abbreviation "L. L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OF FICE			2024 SEP -4
B. If amending the registered agent and/or i agent and/or the new registered office addre	registered office address on <u>sylvere</u> :	our records, <u>enter the 1</u>	()
Name of New Registered Agent.	ATHENA BUSINESS AND) TAX ADVISORS LEC	
New Registered Office Address.	7680 UNIVERSAL BLVD	STI: 100	
New reginered vrige Mares.	Fast	er Florida street address	
	ORLANDO	. Florida	32819
	Lay		Zą: 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

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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
			🗆 Add
			🖸 Remove
			[]Change
			□Add
			🗀 Remove
			□Change
			□Add
			□ Change
			🗆 Add
			□ Change
			□ Add
			□Remove
			□ Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Add the following EIN: 99-1858652 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 ___ 2024 Signature of a member or authorized representative of a member LUIZ VILASBOAS

Typed or printed name of signee

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