

8/1/24, 1:53 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : EXPRESS ACCOUNTING MANAGER
Account Number : 120210000189
Phone : (760)349-8865
Fax Number : (954)301-6257

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

Email Address: expressams314@gmail.com2024 AUG -1 AM 4:07
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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2024 AUG -1 PM 2:30

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDALLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SAFE BROKER LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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K. SALY

AUG - 2 2024

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAFE BROKER LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.
Please return all correspondence concerning this matter to the following:

FERNANDO ANTONIO DE SOUZA
Name of Person
SAFE BROKER LLC
Firm/Company
1645 PALM BEACH LAKES BLVD, FLOOR 12, SUITE 1200
Address
WEST PALM BEACH, FL 33401
City/State and Zip Code
expressams314@gmail.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

FERNANDO ANTONIO DE SOUZA 760 349-8865
Name of Person at () Daytime Telephone Number
Area Code

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 (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

SAFE BROKER LLC

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

FILED
2024 AUG -1 AM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on MAY 03, 2024 and assigned
Florida document number L24000208797.

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 "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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

REGISTERED AGENTS INC

New Registered Office Address:

7901 4TH ST N STE 300

Enter Florida street address

ST PETERSBURG

Florida 33702

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.

David Roberts

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>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Remove
			☐ Change

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2024 AUG 1 - 11:01 AM
TALLAHASSEE, FL 32301
SUNBIZ

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

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2024 AUG - 1 AM 4:07
SECRET INQUIRY, FLORIDA
TALLAHASSEE, FLORIDA

F. 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 (05.0207 (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 12:00 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 25th 2024

FERNANDO A. SOUZA

Signature of a member or authorized representative of a member

FERNANDO ANTONIO DE SOUZA

Typed or printed name of signer: _____

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FAS.