08/14/2024 02:15 PM TO:18506176383 FROM:3213660511 Page: 2

8/44/24, 10:47 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CKO CONSULTING AND TAX SERVICES LLC

Account Number : 128228668100 Phone : (321)366-0510 Fax Number : (321)366-0511

**Enter the email address for this business entity to be used for future Emanual report mailings. Enter only one could be used for future

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRIME BRAZILIAN MARKET LLC

Certificate of Status	0
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Page Count	05
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The following image was updated due to the customer's request to update the required information listed within the articles. -J. Dennis 08/20/2024

K. SALY

AUG 15 2024

Electronic Filing Menu — Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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PRIME BRAZILIAN M	IARKET LLC	CAHASSELVI VIA
(Name of the Umited Liability Compa (A Florida Limited	iny <mark>ay it now appears on our records.</mark> Liability Company)	FLORING
he Articles of Organization for this Limited Liability Company forida document number 1.24000308426	were filed on	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	aility company horo-	
<u> </u>	may things and the same and the	
te new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.H.C."
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	.4300.S HIGHWAY 27. UN CLERMONT, FL 34711	IT104A
nter new mailing address, if applicable:	4300 S HIGHWAY 27 UN	IT 104 A
Mailing address MAY BE A POST OFFICE BOX)	CLERMONT, FL 34711	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	uddress on our records, <u>enter th</u>	te name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fiorida street address	idnZip 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. Thereby confirm that the limited liab!lity company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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record s rd is filed	pecities a delayed effective da	ne, but not an effe	ective time, at	12:01 a.m. on th	ne earlier of: (b)	The 90th day afte	r the
Dated	AUGUST 14th	202	4				
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