8/21/24, 4:34 PM

Division of Corporations

Riorida Départment of State Division of Corpérations Electionic Fing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

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

Email Address: contact@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STUDY AND WORK USA LLC

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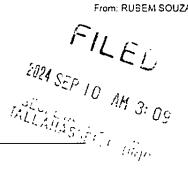
COVER LETTER

Division of Cor					
STUDY A	ND WORK USA LLC				
SUBJECT: Name of Limited Liability Company					
	Amendment and fee(s) are sub ondence concerning this matter	_			
	Rubem Souza				
	-	Name of Person			
	Medeiros Souza corp				
		Firm/Company	· ·		
	1711 Amazing Way, Ste 213				
		Address			
	Ococe, FL 34761				
	City/State and Zip Code				
	contact@medeirossouza.com E-mail address: (to be used for future annual report notification)				
For further information of	oncerning this matter, please c		ication)		
Rubem Souza		407 326 - 8484at () Area Code Daytime Telephone Number			
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he 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

From: RUSEM SOUZA

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



STUDY AND WORK USA 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 L	iability Company v	vere filed on 07/17/2024	and assigned	
Florida document number 1.24000314677	·			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liabil	itv company here:		
The new name must be distinguishable and contain the	vords "Limited Liabilit	y Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applie	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:		-		
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and/or i	registered office ac	idress on our records, enter	the name of the new registered	
agent and/or the new registered office addre		, <u></u>		
	MEDEIBUGGO	HZA COPP		
Name of New Registered Agent:	MEDEIROS SOUZA CORP			
New Registered Office Address:	New Registered Office Address: 1711 Amazing Way, Ste 213			
	Enter Florida street address			
	Ocoee	, Flo	orida <u>34761</u>	
		City	Zip Code	
Name Danistanual Ament's Cinnatures, if alianging	Danistornal Vacants			

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.

To: Rubert Page: 6 of 7 2024-09-09 21:20:30 GMT 14076046519 From: RUBEM SOUZA If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

If amending Authorized I	Person(s) authorized	I to manage, <u>ente</u>	r the title, I	name, and :	address of each	person be	ing added
or removed from our reco	ords:						

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RUBEM SOUZA	1711 Amazing Way, Ste 213	
		Ocoee, FL 34761	Remove
			☐Change
			Change
			Change
		····	□Remove
			Change
			□Remove
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			□ Change
			🗖 Add
			□Remove
			□Change

2024-09-09 21:20:30 GMT

14076046519

From: RUBEM SOUZA

Page: 7 of 7

To: Rubern

Filing Fee: \$25.00