

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : DIPHORA LLC  
Account Number : I20220000014  
Phone : (786)280-3205  
Fax Number : (561)300-0428

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SHINE LOG LLC

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M. SOLOMON  
SEP 16 2024

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SHINE LOG LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HELEN DORNELLAS

Name of Person

H&A BOOKKEEPING SERVICES, LLC

Firm/Company

32 RIPPLING BROOK DR

Address

PALM COAST, FL 32164

City/State and Zip Code

HABOOKKEEPING.COM

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

HELEN DORNELLAS

at (305) 586 7975

Name of Person

Area Code

Daytime 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  
(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

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

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SHINE LOG 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 Liability Company were filed on 08/23/2024 and assigned  
Florida document number L24000370753.

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:

New Registered Office Address:

Enter Florida street address

\_\_\_\_\_, Florida

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.*

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:

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MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MAURO M. VANZELLA	QUADRA 103, LOTE 03 APT 1203	<input checked="" type="checkbox"/> Add
		BRASILIA, DF	<input type="checkbox"/> Remove
		71.909-000 - BR	<input type="checkbox"/> Change
AMBR	ALEXANDRE M L DE OLIVEIRA	QUADRA 102, LOTE 05 APT 1701A	<input checked="" type="checkbox"/> Add
		BRASILIA, DF	<input type="checkbox"/> Remove
		71.907-000 - BR	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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Typed or printed name of signee