L24000387440

(Requestor's Name)	_
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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09/24/24--01015--020 **25.00

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COVER LETTER

, **1**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
MB1 - LM			
SUBJECT:	Name of Lim	ited Liability Company	<u> </u>
The angle and Articles of	Amendment and fee(s) are sub	mitted for filing	
		-	
Please return all correspo	indence concerning this matter	to the following:	
	Adriana Mendez		
		Name of Person	
	TAX SOLUTIONS & BO	OKKEEPING LLC	
		Firm/Company	·
	7751 KINGSPOINTE PK	WY	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	taxes.solutions100@gmail.		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Adriana Mendez		407 930 0829	
Name o	f Person	at ()	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 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 Addres		Street Address:	ntion
Registration : Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MB1 - LMD LLC			
(<u>Name of the Limite</u>	d Liability Compa A Florida Limited	nny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Lia	ability Company	were filed on <u>09/04/202</u>	4 and assigned
Horida document number 1.24000387440			
his amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liah	oility company here:	
N/A			
he new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	N/A	
Principal office address MUST BE A STREE	<u>(ADDRESS)</u>		2024 SEG
			SE T
Enter new mailing address, if applicable:		N/A	24 PM
Mailing address MAY BE A POST OFFICE I	3 <i>0X</i>)		Εω σ
3. If amending the registered agent and/or regent and/or the new registered office addres		address on our records	. enter the <u>name of the new register</u>
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		·
		Enter Florida stree	rt address
			Florida
		City	Zin 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	HECTOR CARRENO	7751 KINGSPOINTE PKWY SUITE 119	□Add
		ORLANDO, FL 32819	■Remove
			□Change
MGR	MARCELO CARVALHAES	253 BOUNTIFUL POINTE CIR	= Add
		WILDWOOD, MO 63040	□Remove
			□Change
			□Remove
			☐Change
			🗖 Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			Remove
			□Change

N/A			<u>.</u>	
				
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				-
	00/17/2021			
ective date, if other than the di effective date is listed, the date must b	ate of filing:		(optional)	
reffective date is listed, the date must b te: If the date inserted in this bloc	e specific and cannot be prior to k does not meet the applical	odate of filing or more to sle statutory filing re	han 90 days after filing.) Pur quirements, this date will	suant to 605.020 not be listed as
ument's effective date on the Dep	artment of State's records.		1	
cord specifies a delayed effective of	late, but not an effective tim	e, at 12:01 a.m. on t	ne earlier of: (b) The 90	th day after the
s tiled.				
Septiembre 16	2024			
			2)	
	<u> </u>	UUH		
Si	gnature of a member of author	ized representative of a	member	
	MARCELL Typed or primed			

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Filing Fee: \$25.00