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Note: Ple te printshis page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ITAX GROUP, LLC Account Number : I20140000115 Phone : (813)882-8426 Fax Number : (813)884-0263

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

Enail Address: costanordeste@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **COSTA CONSULTING & TRADING LLC**

Certificate of Status	0
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Page Count	01
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Electronic Filing Menu Corporate Filing Menu

Help

	Registration Se Division of Co			
		ONSULTING & TRADING L	L.C	
SUBJEC	,l:	Name of Lin	nited Liability Company	
The enck	osed Articles of	Amendment and fee(s) are sub	omitted for filing	
Please re	tum all correspo	ondence concerning this matter	to the following:	
		JOAO B COSTA JUNIO	₹	
			Name of Person	
		COSTA CONSULTING	& TRADING LLC	
			Firm/Company	
		10329 ROSEMOUNT DR		
			Address	
		TAMPA, FL 33624		
		-	City/State and Zip Code	· <u> </u>
		costanordeste@gmail.com		
			to be used for future annual report n	otification)
For furth	er information c	oncerning this matter, please o	all:	
TOVO B	COSTA JUNIO)k	813 884-0263 at ()	
Name of Person		Area Code Day	time Telephone Number	
Enclosed	is a check for the	ne following amount:		
■ \$25. 0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S	Section	<u>Street Address:</u> Registration S	Section
	Division of C P.O. Box 632	-	Division of C The Centre of	
	Tallahassee. 1			roe Street, Suite 810

Tallahassee, FL 32303

Docusign Envelope ID: 65045CEC-7398-49AE-8628-C51CB744650C

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COSTA CONSULTING & TRAD	ING LLC			
(Name of the Limi	ted Liability Comp: (A Florida Limited	any as it now appears on our : Liability Company)	records.)	_
The Articles of Organization for this Limited Liability Company were filed on and assigned				
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	pility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabi	thty Company," the designation	"LLC" or the abbreviatio	n "L L C "
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		10329 ROSEMOUNT D	R	
		TAMPA, FL 33624		
Enter new mailing address, if applicable:		10329 ROSEMOUNT D	ĸ	
(Mailing address MAY BE A POST OFFICE BOX)		TAMPA, FL 33624		20 <u>7</u>
B. If amending the registered agent and/or ragent and/or the new registered office addre		address on our records, <u>c</u>		
Name of New Registered Agent:				- 5
New Registered Office Address:	10329 ROSEM	10UNT DR Enter Florida street o	address [1]	
	TAMPA	Differ 1 for that server t	_, Florida <u>33624</u>	
		С _і ф.	Zip C	ode

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.

p.4

28-0ct-2024 14:04 iTax Services

Dools on Envelope ID: 6504BCEC-7398-49AE-8628-C51CE744850C in amenuing Authorized reison(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
AMBR _	COSTA JUNIOR, JOAO B	10329 ROSEMOUNT DR	
		TAMPA, FL 33624	□Remove
			⊕ Change
			🗀 Add
			□iRemove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			DChange
			□ Add
			□Remove
			□Change

p.5

Docusign Envelope ID: 68048CEC-7398-49AE-8628-C51C9744650C

Effective date, if other than the date of filing: (If an effective date is lasted, the date must be specific and curious be price to date of filing or more than 90 days after filing.) Pursuant to 605 6207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, thus date will not be listed as a document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12.01 a.m. on the earlier of: (b). The 90ah day after the mid is filled Dated OCTOBER 28TH 2024 Segnature of a member or authorized representative of a member Segnature of a member of authorized representative of a member.	. If amending any other informatio	n, enter change(s) here	e: (Attach additional s	heets, if necessary.)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the food is filed Dated OCTOBER 28TH 2024 Jone Datida (orla Junior Signature of a member or authorized representative of a member.)					
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JOAO B COSTA JUNIOR	the record specifies a delayed effective coord is filed	late, but not an effective ti	ime, at 12:01 a.m. on the	earlier of: (b) The 90th d	ay after the
Joan Dahida. (eta Junior Signature of a member or authorized representative of a member JOAO B COSTA JUNIOR	Dated OCTOBER 28TH	2024	<u></u> .		
JOAO B COSTA JUNIOR	_				
			orized representative of a n	iem ber	
	JOAO B COSTA JUNIO		ed name of Soone		

Filing Fee: \$25.00