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(Requestor's Name)					
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(City/Ptate (Tie/Phane #)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					





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2024 DEC -3 AM 8: 23 SECRETARY OF STATE TALLAHASSEE, FL



## **COVER'LETTER**

	gistration Sec vision of Corp						
SUBJECT:		ESTATE & ASSETS LLC					
SUBJECT							
		Amendment and fee(s) are sub	_				
		JAIRO MENEZES BEZEI	RRA FILHO				
Name of Person							
Firmt/Company							
6100 LAKE ELLENOR DR SUITE 151							
Address							
ORLANDO, FL 32809							
	City/State and Zip Code						
	julianakarfitsas@gmail.com  E-mail address: (to be used for future annual report notification)					202 SEC Tr	
For further i	nformation co	neerning this matter, please c		report not meaning		2024 DEC -3 SECRETARY TALLAHAS	·· ;
JAIRO MENEZES BEZERRA FILHO			321 43	6-5110		-3 <b>-</b> 2 -2 -2 -2 -2 -2 -2 -2 -2 -2 -2 -2 -2 -2	
	Name of	Person	Area Code	Daytime Teleph	one Number	1024 DEC -3 AH 8: 23 ECRETARY OF STATE TALLAHASSEE, FL	()
Enclosed is	a check for the	e following amount:				mω	
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		S60.00 Filing Certificate of Certified Cop. (additional copy	Status & y	

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

MB REAL ESTATE & ASSETS 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  $\frac{10/17/2024}{10/17/2024}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SAME The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 6100 LAKE ELLENOR DR SUITE 151 #1102 Enter new principal offices address, if applicable: ORLANDO, FL 32809 UN (Principal office address MUST BE A STREET ADDRESS) 6100 LAKE ELLENOR DR SUITE 151 #1102 Enter new mailing address, if applicable: ORLANDO, FL 32809 UN (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 agent and/or the new registered office address here: SAME Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

, Florida

Zip Code

If amending Authorized Person(s) authorized to manage, enter tho 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
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			Remove
			☐ C'hange
			□Add
			□Remove
			□Change
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			□Add
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			Change
			□Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A 11/22/2024 E. Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If 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 record is filed. Signature of a member or authorized representative of a member JAIRO MENEZES BEZERRA FILHO

Filing Fee: \$25.00

Typed or printed name of signee