# P08000078482

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6 JAN 21 PH 4: 22

JAN 22 2016 C. CARROTHERS

# **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: R & L BRAZIL II	NVESTMENTS CORPORA	ATION	
DOCUMENT NUMBE	P08000078482			
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.		
Please return all correspondent	ondence concerning this ma	atter to the following:		
		Augusto Ferreira		
_	<u> </u>	Name of Contact Person	n	
	Central Florida Forms Service			
	Firm/ Company			
	185 S Westmonte Dr Suite 1216			
_		Address		
		Altamonte Springs FL 32	714	
<u></u>		City/ State and Zip Cod	e	
	c	entralfloridaforms@gmail.	com	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information c	concerning this matter, pleas	se call:		
Augusto Ferreira		at ( 407	786-6400	
Augusto Ferreira at (407) 786-6400  Name of Contact Person Area Code & Daytime Telephone N		de & Daytime Telephone Number		
Enclosed is a check for the	he following amount made	payable to the Florida Depa	urtment of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section  Division of Corporations		Amend	Address ment Section n of Corporations	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

# R & L BRAZIL INVESTMENTS LLC

(Name of Corporation as	s currently filed with the Florida Dept. of State)	
	P08000078482	
(Document I	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the fol	llowing amendment(s)
A. If amending name, enter the new name of the corpor	ration:	
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	Inc," or "Co". A professional corporation name	must contdit, the
B. Enter new principal office address, if applicable:	2700 MONTICELLO WAY	AN 2
(Principal office address MUST BE A STREET ADDRES	KISSIMMEE FL 34741	7 P
		PLCST.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2700 MONTICELLO WAY	RIDA
(muning united states and states	KISSIMMEE FL 34741	
D. If amending the registered agent and/or registered o new registered agent and/or the new registered of fic		
Name of New Registered Agent		
2607 SAN SIME	EON WAY	
	(Florida street address)	
New Registered Office Address: KISSIMMEE	, Florida	741
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent:	
Signature	e of New Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	MANOEL JOSE DA ROCHA	2700 MONTICELLO WAY
X Add			KISSIMMEE FL 34741
Remove			
2) Change	VP	LUIZA NIZOLI ROCHA	2700 MONTICELLO WAY
X Add	-		KISSIMMEE FL 34741
Remove	s	ALAN MARTIN DA ROCHA	2607 SAN SIMEON WAY
3) X Change	<u> </u>	ALAN MARTIN DA ROCHA	
Add			KISSIMMEE FL 34741
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Pemove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
<u> </u>		
		_
<u> </u>		
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
01/18/2016 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.	<b>;</b> )
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	:r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
01/18/2016	
Dated	
Signature Company of the state	<del></del>
(By a director, president or other officer – if directors or officers have not been selected by an incorporator – if in the hands of a receiver, trustee, or other cour	<del>1</del>
(appointed fiduciary by that fiduciary)	•
ALAN MARTIN DA ROCHA	
(Typed or printed name of person signing)	
$\neg \lor P$	
(Title of person signing)	