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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DOMUS GLOBAL TAX ADVISORS LLC

Account Number : I20200000162 Phone : (407)334-7001

Fax Number : (407)743-3888

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

Email Address: fernanda@domusglobaltax.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN CAROLINA MARIANO DA SILVA P.A.

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CAROLINA MAR	IIANO DA SILVA P.A.	110.1	
	BER: P18000062136		· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	FERNANDA FIGUEIREDO			
		Name of Contact Person	n	_
	DOMUS GLOBAL TAX ADVISORS LLC			
	Firm/ Company			
15815 SHADDOCK DR STE 120				024
Address				-EB
	WINTER GARDEN, FL 34787			26
	City/ State and Zip Code			- 2000 000 👺
	FERNANDA@DOMUSGLOBALTAX.COM			2024 FEB 26 AM 10: 57
	E-mail address: (to be us	sed for future annual report	notification)	F: 5
For further information	n concerning this matter, pleas	407	3347001	
Name of Contact Person		Area Co	de & Daytime Telephone Numbe	er
Enclosed is a check fo	or the following amount made			
■ \$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 P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

CAROLINA MARIANO DA SILVA P.A.

(<u>Name</u>	of Corporation as curre	ntly filed with the Florid	a Dept. of State)
P18000062136			
	(Document Number	r of Corporation (if knowr	1)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes. th	ais Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
CAROLINA MEDEIROS P.A.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cartered," "professional association,	Corp." "Inc," or "Co".	A professional corpora	rated" or the abbreviation "Corp.,"
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S			2 2 8
			<u> </u>
			SSE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	10: 57
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>011102 2011</u> ,		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent as	nd/or registered office ac	ddress in Florida, enter t	he name of the
new registered agent and/or the ne			
Name of New Registered Agent	CAROLINA MEDEIRO	OS	
	7025 Carrickbend Lane		
	(Florida	street address)	
New Registered Office Address:	Orlando		Florida 32819
New Registered Office Address.		(Ciţy)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			actions of the position
1 nereny accept the appointment as regis.	иегса адет 1 ат затина	a wan ana accept the that	ganons of the position.
	Signature of New	Registered Agent, if chan	ging
Check if applicable			
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (1	1) (e). F.S.	

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 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.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	CAROLINA MEDEIROS	7025 Carrickbend Lane
Add			Orlando, FL 32819 . 28
Remove			
2) Change			B 26
Add			
Remove 3) Change			AN 10:5
Add	•		
Remove			
4) Change			
Add			
Remove			Lacons de la constitución de la
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(be specific)	
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f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	endment if not contained in the amendment usen.	
		·
	111114	

		2/21/2024			
		it(s) adoption:	, if o	ther th	an the
date this docume	nt was signe				
Effective date if	'annliaahla.	2/21/2024			
Effective date <u>if</u>	<u>аррисаозе</u> :	(no more than 91) days after amendment file date)			
		this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ill not be	listed	as the
Adoption of Am	endment(s)	(CHECK ONE)			
☐ The amendme		ere adopted by the incorporators, or board of directors without shareholder action ar	nd shareho	older	
		ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.	Ş.	202Կ	
must be sepai	rately provid	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s): es cast for the amendment(s) was/were sufficient for approval	ري ^{۳۲}	2024 FEB 26 AP	
bv		**	To o	<u> </u>	
٠,		(voting group)		AM 10: 57	
		2024			
	Signature _	Carolina Medeiros			
	(F s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)			
		CAROLINA MEDEIROS			
		(Typed or printed name of person signing)			
		PRESIDENT			
		(Title of person signing)			