

P22 000062245

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H220003080613ABCW

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : ALPHA BUSINESS CONSULTING, LLC  
Account Number : I20080000061  
Phone : (407)582-9830  
Fax Number : (407)601-6393

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

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
LLWI TECH, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

FILED  
2022 SEP 27 AM 10:07  
TALLAHASSEE, FL  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS



September 22, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LLWI TECH, INC.  
6964 SEA CORAL DR  
UNIT 124, BUILDING 3  
ORLANDO, FL 32821

SUBJECT: LLWI TECH, INC.  
REF: P22000062245

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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There are lines running down each page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline  
Regulatory Specialist II Supervisor

FAX Aud. #: H22000308061  
Letter Number: 522A00020405

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2022 SEP 27 AM 11:59



September 13, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LLWI TECH, INC.  
6964 SEA CORAL DR  
UNIT 124, BUILDING 3  
ORLANDO, FL 32821

SUBJECT: LLWI TECH, INC.  
REF: P22000062245

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Tammi Cline  
Regulatory Specialist II Supervisor

FAX Aud. #: H22000308061  
Letter Number: 522A00020405

2022 SEP 27 AM 10:07

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: LLWI TECH, INC.

DOCUMENT NUMBER: P22000062245

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA D PINHEIRO

Name of Contact Person

ALPHA BUSINESS CONSULTING, LLC

Firm/ Company

6412 W COLONIAL DR

Address

ORLANDO, FL 32818

City/ State and Zip Code

pinheirma@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA D PINHEIRO

Name of Contact Person

at ( 407 ) 582-9830

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED  
SEP 27 2022  
TALLAHASSEE, FL

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Articles of Amendment  
to  
Articles of Incorporation  
of

LLWI TECH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P22000062245

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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**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                      PT              John Doe

X Remove                    V                Mike Jones

X Add                         SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>    </u> Change	<u>DIR</u>	<u>Ana Paula Campelo de Medeiros</u>	<u>6964 Sea Coral Dr Unit 124</u>
<u>X</u> <u>    </u> Add			<u>Building 3</u>
<u>    </u> Remove			<u>Orlando, FL 32821</u>
2) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
3) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
4) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
5) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>
6) <u>    </u> Change	<u>    </u>	<u>    </u>	<u>    </u>
<u>    </u> Add			<u>    </u>
<u>    </u> Remove			<u>    </u>

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 CLERK OF COURT  
 H. LEAH MASSEY, CL

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

NONE

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,**

**provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

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CLERK OF COURT  
JULIA S. SEC. FIL

09/07/2022

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval  
by \_\_\_\_\_."  
(voting group)

09/07/2022  
Dated \_\_\_\_\_

Signature \_\_\_\_\_  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

WILLIAMS JEZINI

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

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