L17000075749

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| | gistration Sec vision of Corp | | | |
|----------------|----------------------------------|---|---|---|
| SUBJECT: | | R INVESTMENTS LLC | | |
| SUBJECT; | | Name of Lim | ited Liability Company | |
| The enclose | d Articles of A | Amendment and fee(s) are sub | mitted for filing. | |
| Please returi | n all correspor | ndence concerning this matter | to the following: | |
| | | CAROLINA MENEGHE | rrı | |
| | | | Name of Person | |
| | | SAFETY BUSINESS LLC | | |
| | | | Firm/Company | |
| | | 6220 S ORANGE BLOSS | OM TRAIL, SUITE 600 | |
| | | | Address | |
| | | ORLANDO, FL 32809 US | 3 | |
| | | | City/State and Zip Code | |
| | | DOCUMENTS@SAFETY | TAX.COM to be used for future annual report notific | |
| 5 6 d <i>-</i> | 6 | | - | zation) |
| For further i | nformation co | ncerning this matter, please ca | ali: | |
| CAROLINA | A MENEGHE | TTI | 407 888 4747 at () | |
| | Name of | Person | | Telephone Number |
| Enclosed is | a check for the | e following amount: | | |
| ■ \$25.00 I | Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2016 SEP 22 PM 3: 09

(ALLAHASSEE FLORID)

DIGIPOWER INVESTMENTS 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 I Florida document number L13000075749 | Liability Company were filed on _ | 05/23/2013 and assigned |
|---|--|--|
| This amendment is submitted to amend the fol | lowing: | |
| A. If amending name, enter the new name | of the limited liability company | here: |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the | designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE | S BOX) | |
| | | |
| | | |
| If amending the registered agent and/or registered office address on our records, enter the name of the new | | |
| registered agent and/or the new registered (| office address here: | |
| Name of New Registered Agent: | MARCOS G JARDIM | |
| New Registered Office Address: | 10432 LAVANDE DR | |
| | Enter Fl | orida street address |
| | ORLANDO | , Florida ³²⁸³⁶ |
| | City | Zip Code |

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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(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 | MARCOS G JARDIM | 10432 LAVANDE DR | ■ Add |
| | | ORLANDO, FL 32836 | ☐ Remove |
| | | | ☐ Change |
| MGR | MARCOS G JARDIM | AV. JOAQUIM DUARTE | □ Add |
| | | MOLEIRINHO, 2571 | ■ Remove |
| | | MARINGA, PR 87060350 BR | □ Change |
| MGR | JOSE F JARDIM JUNIOR | 10432 LAVANDE DR | ■ Add |
| | | ORLANDO, FL 32836 | □ Remove |
| | | | ☐ Change |
| | | | □ Add |
| | | | 200 SEPage ANT OF S |
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| fective date, if other than the date of the date is listed, the date must bote: If the date inserted in this blococument's effective date on the Dep | be specific and cannot be prock does not meet the app | ior to date of filing licable statutory | or more than 90 day | (optional) ys after filing.) Pursu its, this date will no | ant to 605.0207 ot be listed as |
| record specifies a delayed e | effective date, but rd is filed. | not an effectiv | ve time, at 12 | :01 a.m. on th | e earlier o |
| The 90th day after the recor | 2016 | 1 | | | |
| SEPTEMBER 8th | 2010 | | | | |
| SEPTEMBER 8th | | | | <i>:</i> . | |
| ited | Signature of a member or au | ithofizod representa | ative of a member | <u>:.</u> | |

Filing Fee: \$25.00