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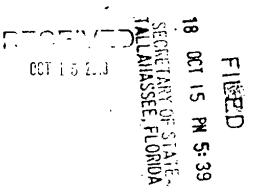
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OCT 2 0 2018 S. YOUNG

## **COVER LETTER**

TO:

TO: Registration Se Division of Co				
subject: <u>375</u>	5 EB-5 Investigation Name of Lim	ors Gp JLC. ited Liability Company	<del></del> -	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Edwardo Sote	Name of Person		
	3755 EB-5	Investors GP 221	·	
	3755 NW 78	th Axe	' <u>us</u> &	<b>,</b>
	<del></del>	Address		3 7
	Donal fl 33	166	MASS	1 15 P
	abarnes Quinace E-mail address:	City/State and Zip Code  Mu.com to be used for future annual report note	ication) . E.G.	72 5. 3. 5. 3.
For further information of	concerning this matter, please ca	all:		· O
Edvardo S	ofelo of Person	at ( <u>30\$</u> ) <u>St0 l&amp;</u> Area Code Daytimo	38 Z Telephone Number	
Enclosed is a check for t	he following amount:			
\$25.00 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 tailditional copy is enclosed	
Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314	STREET/COURI Registration Sectio Division of Corpor Clifton Building 2661 Executive Ce	n ations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3755 EB-5 Invest	ers Gp 21c			
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)			
The Articles of Organization for this Limited Liability C	(Same of the Limited Liability Company)  (A Florida Limit			
	<del></del> '			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ited liability company here:			
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	(ESS)			
	FART			
Enter new mailing address, if applicable:	ASS TO THE			
(Mailing address MAY BE A POST OFFICE BOX)	mg g b			
	<del></del>			
Name of New Registered Agent:				
New Registered Office Address:				
Enter Florida street address				
	, Florida			
	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

· If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being . or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Address</u> Type of Action <u>Name</u> NW 700 Are MER 3755 ومنا DOCAL F1 33166 ☑ Remove ☐ Change Edvardo Sotelo 3755 NW 78M AVE Mal DOTAL FT 33/66 ☐ Change □ Add ☐ Remove ा**ळ** D Change □ Add ☐ Remove ☐ Change □ Add \_□ Remove

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L'ffocti	re date, if other than the date of filing:(option		<b>5</b> : 39	
If an effe	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fill f the date inserted in this block does not meet the applicable statutory filing requirements, this d	ing.) Pursuar	it to 605.03	07 (3
	it the date inserted in this otock does not meet the applicable statutory thing requirements, this dint's effective date on the Department of State's records.	ate will not	be listed	as un
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.r 90th day after the record is filed.	n, on the	earlier	of:
1110				
Dated _	October 10 2010			
	Signature of a member or authorized representative of a member		<del></del>	
	The signature of a memorial for a memorial for a memorial for the signature of t			
	Edvardo Soldo			

Page 3 of 3

Filing Fee: \$25.00