## 15000/80661

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J. HARRIS

## COVER LETTER

TU:	Division of Cor			
SUBJE		Investments, LLC		
SUBJE	CI	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Mario Golombek		
		<del></del>	Name of Person	
		Golombek Investments, LI	_C	
		<del></del>	Firm/Company	
20938 NE 37 Ct.				
<del></del>			Address	<u> </u>
		Miami, FL 33180		
		Address		
For furth	ner information c			otheation)
		oncerning this matter, piease en		
Mario G	olombek		786 309-0260 at ()	
	Name o	f Person	Arca Code Dayt	time Telephone Number
Enclosed	I is a check for th	ne following amount:		
<b>S</b> \$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 (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Golombek 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 Liability Company were filed on 10/23/2015 and assigned Florida document number L15000180661 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Mario Golombek, LLC 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 applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. 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: New Registered Office Address: Enter Florida street address 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 heing 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 amendin	g Authorized Person(s) authorized to n l from our records:	nanage, <u>enter the title, name, a</u>	nd address of each person being added			
MGR = A AMBR = A	GR = Manager  1BR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
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			☐ Remove			
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If amending any other in	formation, enter change(s) here: (Atta	ech additional sheets, if nece	rssary.)
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Effective date, if other the (If an effective date is listed, the c	an the date of filing:	(option of the filling or more than 90 days after	onal) filing.) Pursuant to 605.0207
Note: If the date inserted in	this block does not meet the applicable state the Department of State's records.	utory filing requirements, this	date will not be listed as
divention of creenive date of	rate Department of Trace's Decords.		
the record specifies a de ) The 90th day after th	elayed effective date, but not an ef le record is filed.	fective time, at 12:01 a	.m. on the earlier of
July 26	2017		T. 2
Dated			2017 .
Man	X Wal		
1-11/200	Signature of a member or authorized rep	resentative of a member	<del>- 5/2 \ -</del>
	organization of a memory of animothica rep		****
Maria Galambula			
Mario Golombek		of signer	FE PH III

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Filing Fee: \$25.00