Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160

: (800)494-3124 Phone : (305)675-2811 Fax Number

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AFSM INVESTMENTS, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	AFSM INVEST									
(Name of the Limite	ed Liability Compan A Florida Limited Li	γ as it now appe ability Company	ars on our records.)							
The Articles of Organization for this Limited Li	ability Company v	were filed on _	MARCH 07, 2016	and ass	igned					
Florida document numberL16000046486 This amendment is submitted to amend the folio	wing:									
A. If amending name, enter the new name of	-	ity company l	<u>here</u> :							
The new name must be distinguishable and contain the w	ords "Limited Liabilit	y Company," the	designation "LLC" or the	abbreviation "L.	L.C."					
Enter new principal offices address, if applica	able:	848 BRICE	KELL AVENUE, STE	200						
(Principal office address MUST BE A STREE		MIAMI, F	LORIDA 33131							
Enter new mailing address, if applicable:	•	848 BRICI	KELL AVENUE, STE	200						
(Mailing address MAY BE A POST OFFICE A	BOX)	MIAMI, F.	MIAMI, FLORIDA 33131							
B. If amending the registered agent and/oregistered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	fice address here:			er the name DEC 19 A	of the nev					
tion registers Office redices.		Enter Fl	orida street address							
	MIAMI		, Florida	<u>33</u> 131 33						
		City		Zip Col						

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 added or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMHR	AFSM LTD.	848 BRICKELL AVENUE	□ AdJ
		STE 1130	■ Remove
		MIAMI, FLORIDA 33131	Change
MGR	ANDERSON F DA SILVA MORAES	848 BRICKELL AVENUE	
		STE 200	
		MIAMI, FLORIDA 33131	
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ne record specifies a d	elaved effective	e date, but no	t an effective t	ime, at 12:01 a	.m. on the ear	lier of
The 90th day after th	ne record is file	:d.				
Scott and to	117.7	2018				·
DatedDECEMBER 191		-· - 7018	·			
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			- B-75-			
	Signature o	a member of author	orized representative	of a member		

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