

17000 165 342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

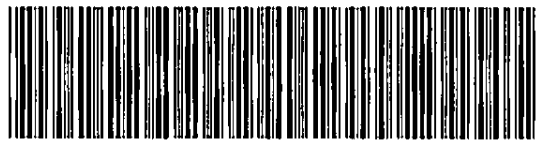
(Business Entity Name)

(Document Number)

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AUG 26 2019

FILED
2019 AUG 26 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FL

SEP 05 2019
C Kinsey

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SHINA CAPITAL 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 8/3/17 and assigned Florida document number L17000165342.

This amendment is submitted to amend the following:

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 applicable:

333 SE 2ND AVE. SUITE 2000, MIAMI FL 33131

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

333 SE 2ND AVE. SUITE 2000, MIAMI FL 33131

(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

_____, Florida

City

Zip Code

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SECTION 6
TALLAHASSEE FL

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 an existing 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>	<u>Address</u>	<u>Type of Action</u>
MGR	SHINA INVESTMENT LLC		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		333 SE 2ND AVE, SUITE 2000 MIAMI FL 33131	<input checked="" type="checkbox"/> Change
MGR	ENERGY FOUR LLC	1395 BRICKELL AVENUE SUITE 650, MIAMI, FL 33131	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GALOTTI, NICOLAS VICTOR		<input type="checkbox"/> Add
		20900 NE 30TH AVE, FLOOR 8 AVENTURA FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

