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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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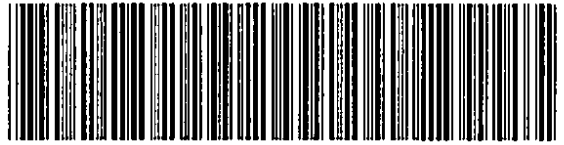
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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JAN 27 2020

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: FOCARIUM LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SUSANA VIVARES

Name of Person

FOCARIUM LLC

Firm/Company

1111 Brickell Bay Dr - Apt 1510

Address

Miami FL 33131-2957

City/State and Zip Code

susana.vivares@focarium-partners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUSANA VIVARES

Name of Person

at ( 917 ) 7513205

Area Code

Daytime Telephone Number

Enclosed is a check for the 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  
(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**

FOCARIUM 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 December 13, 2019 and assigned Florida document number L19000303785.

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:

(Principal office address MUST BE A STREET ADDRESS)

1111 Brickell Bay Drive

Apt 1510

Miami, FL 33131-2957

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1111 Brickell Bay Drive

Apt 1510

Miami, FL 33131-2957

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**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: Susana Vivares

New Registered Office Address: 1111 Brickell Bay Drive

Enter Florida street address

Miami, Florida 33131-2957  
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 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>
Member	FOCARIUM PARTNERS LLC	30 N Gould St Ste N Sheridan, WY 82801	<input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove  <input type="checkbox"/> Change
MGR	Susana Vivares	1111 Brickell Bay Drive, Apt 1510, Miami, FL 33131	<input checked="" type="checkbox"/> Add  <input 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 <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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 Add  
 Remove  
 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FOCARIUM LLC is a member managed entity whose manager is Susana Vivares (MGR)

FOCARIUM-PARTNERS LLC is a member of FOCARIUM LLC

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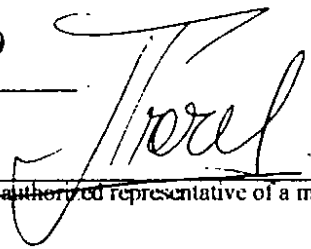
E. Effective date, if other than the date of filing: 23rd of December 2019 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated 23rd December, 2019



Signature of a member or authorized representative of a member

SUSANA VIVARES

Typed or printed name of signee