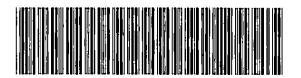
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| Special Instructions to Filing Officer: |
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**VIA FEDEX** 

To: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Corpag Services USA, Inc.

999 Brickell Avenue Suite 820 Miami - FL 33131 USA

T: +1 305 358 7872 F: +1 309 420 9837 E: miarni@corpag.com W: www.we-are-corpag.com

September 28, 2020

#### RE: HATUN INVESTMENTS LLC L20000176910

Please find the enclosed Articles of Amendment to the Articles of Organization for the subject company.

These Articles are being filed for two purposes.

- 1. Updating the addresses of the Managers.
- 2. Correcting the spelling of the name of Manager, **XIMENA MARIA SACO PEYON DE PAREDES** to include the missing "s" which did not fit within the textbox of the online application.

Also enclosed is a check for the filing fee and a certified copy of this document.

Should questions arise, please contact me using the information below and provided in the cover letter.

Kind regards,

Sara Bogh T: 305-358-7872 E: sara@corpag.com

## **COVER LETTER**

TO:

|             | egistration Se<br>ivision of Cor |  |   |   |
|-------------|----------------------------------|--|---|---|
| CUD IECT    |                                  | VESTMENTS LLC                                |   |   |
| SUBJECT     | •                                | Name of Limi                                 | ited Liability Company  |   |
| The enclos  | ed Articles of                   | Amendment and fee(s) are sub                 | mitted for filing.  |   |
| Please retu | m all correspo                   | ndence concerning this matter                | to the following:   |   |
|             |                                  | SARA BOGH                                    |   |   |
|             |                                  |  | Name of Person  |   |
|             |                                  | CORPAG SERVICES USA                          | 1   |   |
|             |                                  | <del></del>                                  | Firm/Company  | <del></del>   |
|             |                                  | 999 BRICKELL AVE. STI                        | E 820   |   |
|             |                                  |  | Address   |   |
|             |                                  | MIAMI, FL 33131                              |   |   |
|             |                                  |  | City/State and Zip Code   |   |
|             |                                  | MIAMI@CORPAG.COM                             |   | <u> </u>  |
|             |                                  | E-mail address: (1                           | o be used for future annual report no                               | otification)  |
| For further | information c                    | oncerning this matter, please co             | all:  |   |
| SARA BO     | GH                               |  | 305 305-7872  |   |
|             | Name o                           | f Person                                     | Area Code Dayti   | me Telephone Number   |
| Enclosed is | s a check for th                 | ne 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,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|             | lailing Addres                   |  | Street Address:<br>Registration S                                   | ection  |
|             | ivision of C                     |  | Division of Co  | orporations   |
|             | O. Box 632                       |  | The Centre of   |   |
| Ţ           | allahassee, l                    | *L 32314                                     | Z415 IN. IVIONI   | oe Street, Suite 810  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| HATUN INVESTMENTS LLC  |  |                              |
|--|--|------------------------------|
| ( <u>Name of the Limited Liability</u><br>(A Florida I   | Company as it now appears on our records.)<br>Limited Liability Company) |                              |
| The Articles of Organization for this Limited Liability Co   | ompany were filed on   | and assigned                 |
| Florida document number L20000176910   |  |                              |
| This amendment is submitted to amend the following:  |  |                              |
| A. If amending name, enter the new name of the limit   | ed liability company here:   |                              |
| The new name must be distinguishable and contain the words "Limit  | ed Liability Company," the designation "LLC" of                          | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:  |  |                              |
| Principal office address MUST BE A STREET ADDRI  | ESS)   |                              |
|  |  | ~                            |
|  |  | (Ú                           |
| Enter new mailing address, if applicable:  |  | - <del>( ( )</del>           |
| ••   |  | <u> </u>                     |
| Mailing address MAY BE A POST OFFICE BOX)  |  | 724                          |
|  |  |                              |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | office address on our records, enter th                                  | e name of the newgregisters  |
| igent and/or the new registered office address here:   |  |                              |
| Name of New Registered Agent:  |  |                              |
| New Registered Office Address:   | Enter Florida street address   | <del></del>                  |
|  |  | • 1                          |
| <del></del>  | Flor   | 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>                        | Address   | Type of Action      |
|--------------|------------------------------------|---|---------------------|
| MGR          | Maria Rosanna Peyon Giribaldi      |   | □Add                |
|              |                                    |   | □Remove             |
|              |                                    | Perez Roca 138, Dpto 403, Barranco, Lima, Peru            |                     |
| _MGR_        | Rafael Armando Saco Peyon          |   | □Add                |
|              |                                    |   | □Remove             |
|              |                                    | Malecon de la Reserva 775, Dpto. 702, Miraflores, Lima, P | eru ≣Change         |
| MGR          | Lorena Maria Saco Peyon de Woll    |   | □Add                |
|              |                                    |   | □Remove             |
|              |                                    | Malecon Aurelio Souza 585, Dpto. 101, Barranco, Lima, Pe  | ru_ <b>B</b> Change |
| MGR_         | Ximena Maria Saco Peyon de Paredes |   | 🗆 Add               |
|              |                                    |   | □Remove             |
|              |                                    | Malecon Paul Harris 382, Dpto. 202, Barranco, Lima, Peru  | <b>=</b> Change     |
|              |                                    |   | □ Add               |
|              |                                    |   | □Remove             |
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| on effective a solution of the | date is listed, the d<br>date inserted in<br>effective date on | this block of                                | pecific and e<br>loes not me | et the app    | ior to date of<br>licable stat | nung or mo:   | e than 90 da | ys after fil: | ing.) Pursua | nt to 605.0207<br>It be listed as |
| record spec<br>I is filed.   | rifies a delayed e   | effective dat                                | e. but not a                 | n effective   | e time, at 13                  | 2:01 a.m. oi  | the carlie   | r of: (b)     | The 90th     | day after the                     |
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Filing Fee: \$25.00