L21000109728

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(00	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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21 DEC - 3 FR 3: 31

T. MATTHEWS

DEC 20 2021

COVER LETTER

TO:

Registration Section

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SUBJECT:	ARIJO.I	nvestments canada llo	C	• • •
_		Name of Lim	ited Liability Company	
The enclosed /	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return a	all correspo	ndence concerning this matter	to the following:	
		Ryan Robertson		
			Name of Person	
		Altro LLP		
			Firm/Company	
		155 University Avenue, Sc	ite 300	
			Address	 -
		Toronto, Ontario, Canada,	M5H 3B7	
			City/State and Zip Code	
		rrobertson@altrolaw.com		
For further inf	ormation c	E-mail address: () oncerning this matter, please ca	to be used for future annual r all:	report notification)
	Ryan Rol	bertson	at (16)	477-8165
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a c	check for th	ne following amount:		
□ \$25.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status
	ing Addres stration S		<u>Street Ad</u> Registra	ddress: ation Section
Registration Section Division of Corporations		Division	Division of Corporations	
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 21 DEC = 2 TH 3: 31

ARIJO INVESTMENTS CANADA 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 $\frac{03/03/2021}{1}$ ___ and assigned Florida document number <u>L21</u>000109728 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) 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:

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

Enter Florida street address

, Florida

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 GARTEN, IRVING	36 LOWTHER AVENUE	□Add	
		TORONTO, ONTARIO, M5C 2T6	■Remove
			Change
			□Adđ
			Remove
			□Change
			□Add
		□Remove	
		□Change	
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		□Remove	
			Change
		□Add	
		Remove	
		□Change	
		□ Add	
			□ Remove
			□ Change

famend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	
	
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t an effecti <u>Note:</u> - If t	date, if other than the date of filing:
record s d is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	December 6
	/s/ Irving Garten
	Signature of a member or authorized representative of a member
	IRVING GARTEN
	Typed or printed name of signee

4. * 1. % *

Filing Fee: \$25.00