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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T WASHINGTON

DEC 07 2016

**ARMENTEROS LAW, P.A.**

ATTORNEYS AT LAW

CECILIA ARMENTEROS

11900 BISCAYNE BOULEVARD, STE 618  
MIAMI, FLORIDA 33181

TELEPHONE: (305) 758-2020 FACSIMILE: (866) 239-2229

December 1, 2016

**Sent Via FedEx:**

Florida Department of State  
Division of Corporations -Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
16 DEC -6 PM 3:39  
STATE  
TALLAHASSEE, FLORIDA

RE: NEWINVEST LLC - Document No.: L03000020450  
AMENDMENT TO ARTICLES OF CORPORATION

To whom it may concern:


Please be advised that NEWINVEST LLC, has completed and enclosed the State's form for Articles of Amendment to Articles of Organization as required by the Division of Corporations.

Also enclosed is our firm's check in the amount of \$25.00 (TWENTY-FIVE DOLLARS and 00/100 CENTS), for the filing fee as per your cover letter.

Please do not hesitate to contact us should you require any further information.

Thank You.

Very truly yours,



Cecilia Armenteros, Esq.

CA/ms

*Enclosures*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NEWINVEST 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:

CECILIA ARMENTEROS, Esq.  
Name of Person

ARMENTEROS LAW P.A.  
Firm/Company

11900 BISCAYNE BLVD., Ste. 618  
Address

MIAMI, FL 33181  
City/State and Zip Code

Cecilia@AM-PA.COM / or MS@AM-PA.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melanie SANTANA at (305) 758 2020  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

NEW INVEST 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 6/06/2003 and assigned Florida document number L03000020450.

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:

*Enter Florida street address*

Florida

*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>
AMBR	DANIELLE REZLAN	12500 NE 15 <sup>TH</sup> AVENUE	<input type="checkbox"/> Add
		NORTH MIAMI, FL 33161	<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
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DADE COUNTY, FLORIDA

FOR THE STATE  
OF CALIFORNIA  
COUNTY OF ALBANY

FILED  
16 DEC -6 PM 3:40  
ST. LOUIS  
MISSOURI  
U.S. DEPT. OF JUSTICE

(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)

(b) The 90th day after the record is filed.

Dated deceember 1st NOVEMBER 2016

Signature of a member or authorized representative of a member

GILLES REZLAN

Typed or printed name of signee