

LD9000004107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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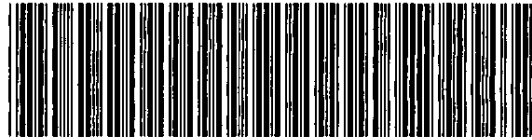
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

O SIMMONS
JUN 14 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PERYDEL INVESTMENTS, 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:

FRANCISCO JOSE PEREZ DELGADO

Name of Person

ATTN: LEE J. OSIASON P.A.

Firm/Company

201 ALHAMBRA CIRCLE, STE 1205

Address

CORAL GABLES, FLORIDA 33134

City/State and Zip Code

FRANCISCO@MREINVESTMENT.COM

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

For further information concerning this matter, please call:

FRANCISCO JOSE PEREZ DELGADO

Name of Person

at (954) 512-0639

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**

PERYDEL INVESTMENTS, 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 05/24/2017 and assigned
on Florida document number L09000004107.

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

LEE J. OSIASON P.A.

201 ALHAMBRA CIRCLE; STE 1205

CORAL GABLES, FLORIDA 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

LEE J. OSIASON P.A.

201 ALHAMBRA CIRCLE; STE 1205

CORAL GABLES, FLORIDA 33134

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:

FRANCISCO JOSE PEREZ DELGADO

New Registered Office Address:

201 ALHAMBRA CIRCLE; STE 1205

Enter Florida street address

CORAL GABLES

City

, Florida

33134

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

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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>
MGRM	JULIA DELGADO DE PEREZ	1332 PLUMOSA WAY	<input type="checkbox"/> Add
		WESTON, FL. 33327 US	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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.

Dated June 2nd, 2017

~~Signature of a member or authorized representative of a member~~

FRANCISCO JOSE PEREZ DELGADO

Typed or printed name of signee