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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	CAPRY IN	VESTMENTS, LLC		
SOBATICT.		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		NELSON BALLESTEROS	S	
Name of Person			Name of Person	
		NELPI SERVICES, INC.	-	
			Firm/Company	
	2393 SOUTH CONGRESS AVE STE 223			
Address				
		WEST PALM BEACH, FI	L 33406	
			City/State and Zip Code	
		NELSON@NELPISERVIC		
		E-mail address: (to be used for future annual report notification)	
For further in	iformation co	oncerning this matter, please ca	all.	
NELSON BA	ALLESTER	os	561 253-6070 at ()	
	Name of	f Person	Area Code Daytime Telephone Number	
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55 00 Filing Fee & □ \$60.00 Filing Certified Copy Certificate of (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Registra Divisio P.O. Bo	ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	CORPORATION THE STALE OF STALE OF STALE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAPRY INVESTMENTS, LLC		
(Name of the Limi	ted Liability Company as it now apportanted Liability Company	ears on our records.) /)
The Articles of Organization for this Limited L	iability Company were filed on [FLORIDA and assigned
Torida document number L09000011003	·	
his amendment is submitted to amend the foll	owing:	
a. If amending name, <u>enter the new name o</u>	f the limited liability company	here:
he new name must be distinguishable and contain the v	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.Isc.";
Inter new principal offices address, if applic	eable:	ASE SE OSE
Principal office address MUST BE A STREE	ET ADDRESS)	HAT I OA
		88. g C. S.
		G A RP S
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
B. If amending the registered agent and egistered agent and/or the new registered o	ffice address here:	
Name of New Registered Agent:	FELIPE PIRAQUIVE VALEN	CIA
New Registered Office Address:	4356 DALIVA TER	
		Florida street address
	GREENACRES	, Florida 33463
	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.

It Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	CARLOS H. OSORIO	5626 GUN CLUB	Add
		WEST PALM BEACH, FL 33415	■ Remove
			□ Change
MGR	FELIPE PIRAQUIVE VALENCIA	4356 DALIVA TER	Add
		GREENACRES, FL 33463	□ Remove
			☐ Change
			Remove
			Change
			Remove
			Change
			Add
			SECRETARY OF STATE
			Change

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-				-
(If an effe	ve date, if other than the date of filing: (opticities date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after	r filing.) Pursu	ant to 66	
Note: 1 docume	If the date inserted in this block does not meet the applicable statutory filing requirements, this int's effective date on the Department of State's records. Ord specifies a delayed effective date, but not an effective time, at 12:01 and 12:01 are specified as the specifies and the specifies are specified as the specifies and the specifies are specified as the specifies are specified as the specified as the specified as the specifies are specified as the	s date will n	ot be lis	sted as the
	90th day after the record is filed.			
Dated	Signatule of a member or authorized representative of a member	SECRETAR ALLAHASS	15 JUL 6	FI SECRETAR JIVISION OF I
	WALTER PIRAQUIVE Typed or printed name of signee	IY OF SIATE	5 MM 6:5	ILED RY OF STAI CURPORAT

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Filing Fee: \$25.00