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. COVER LETTER

TO: Registration S Division of C			
	NVESTMENT GROUP, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	Kristine Lubian Perez		
		Name of Person	
		Firm/Company	
	3850 Bird Road, PHI	· mic company	
		Address	
	Miami, FL 33146		
	kristinclubian@gmail.com	City/State and Zip Code	
		to be used for future annual report notific	cation)
For further information	concerning this matter, please of	all:	
Kristine Lubian Perez		305 796-0205	
Name	of Person		Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL 3	orations illahassee Street, Suite 810

. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RENZO INVESTMENT GROUP, LLC

		l I
(<u>Name of the Limited I</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil	lity Company were filed on 3/18/2009	and assigned
Florida document number L09000026824		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
Mr. Company, LLC.		
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	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:	; ·	2024 A
(Mailing address MAY BE A POST OFFICE BO)	X)	
	•	name of the new registered agree to comply with the am familiar with and Or, if this document is the limited liability.
		[] 3
B. If amending the registered agent and/or regis		name of the new registere
agent and/or the new registered office address he	ere:	258
Night of CNI and District Control of CNI and C		•
Name of New Registered Agent:		1
New Registered Office Address:	Enter Florida street address	
_	Florid	ia
New Registered Agent's Signature, if changing Regi		
		amaa to aannih mith th
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	ind complete performance of my duties, and I red agent as provided for in Chapter 605, F.S istered office address, I hereby confirm that t	am familiar with and Or, if this document is
	If Changing Registered Agent, Signature of Ne	w Registered Agent

If amending A or removed fr	Authorized Person(s) authorized to om our records:	manage, enter the title, name, as	nd address of each person being add
MGR = Mar AMBR = Aut	nager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			☐ ☐ Change
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If amending any other informa	tion, enter change(s) here: //Att	ach additional sheets, if nec	es <mark>s</mark> ary.)	
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Iffective date, if other than the	date of filing:	(onti	 ional)	
f an effective date is listed, the date mus	t be specific and cannot be prior to date on the cock does not meet the applicable state.	of filing or more than 90 days afte	r filing.) Pursuant to 60	05.0207 (3 sted as th
record specifies a delayed effective d is filed.	e date, but not an effective time, at	12:01 a.m. on the earlier of: (l	b) The 90th day aft	er the
Pated April 16	2024			
	risure Dun			
Kristine Lubian Perez	Signature of a member or authorized (eprosentative of a member		
	Typed or printed name	of signee		