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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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| TO: | Registration Se Division of Cor | | | |
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| CHRIE | IVY GAL 1 | NVESTMENT, LLC | | |
| SUBJEC | -I; <u> </u> | Name of Lin | ited Liability Company | · |
| The encl | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| | | ndence concerning this matter | - | |
| | | ALVARO CASTILLO B. | | |
| | | | Name of Person | |
| | | CASTILLO & ASSOCIA | TES | t and the second |
| | | | Firm/Company | ···· |
| 1390 BRICKELL AVENUE SUITE 200 | | | | |
| | | | Address . | |
| | | MIAMI, FLORIDA 33131 | I | |
| | | | City/State and Zip Code | |
| | | ALVARO@ALVAROCAS | | |
| | | E-mail address: (| to be used for future annual report not | ification) |
| For furth | er information co | oncerning this matter, please c | all: | |
| CARME | N PARACCHIN | И | 305 371-5540 | |
| | Name of | Person | | ne Telephone Number |
| Enclosed | is a check for the | e following amount: | | |
| \$25.0 | 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) |
| | Registra Divisior P.O. Bo | NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314 | STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3 | on orations enter Circle |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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| 'IVY GAL INVESTMENT, LLC | • | | | 다. CD | ### Money |
|-------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------|----------------------|------------|-----------------|
| (Name of the Limit | ed Liability Company | as it now appears on our records illity Company) | <u>ज्ञात</u> | <u></u> | - 4 |
| | (A Florida Limited Lian | onity Company) | E P | | \$ 12.000 [] |
| The Articles of Organization for this Limited Li | ability Company we | ere filed on <u>07/30/2009</u> | <u> </u> | ≥and a | assigned |
| Florida document number L09000073437 | | | AD. VIS | == | |
| | | | ্ৰাল | Ω | |
| This amendment is submitted to amend the following | owing: | | ~ | ω | |
| A. If amending name, enter the new name of | f the limited liabilit | v company here: | | | |
| A. If amending name, enter the new manie o | the minera mapine | y company nere. | | | |
| The new name must be distinguishable and contain the w | ords "Limited Linhility | Company " the designation "I I C" | " or the abl | reviation | "I I C " |
| The new name must be distinguishable and contain the w | ords Emined Diability | Company, the designation Elec | vi ilic abi | ACT IMPORT | B.D.C. |
| Enter new principal offices address, if applic | able: _ | **** | | | |
| (Principal office address MUST BE A STREE | T ADDRESS) | | | | <u></u> |
| | | | | | |
| | _ | | | | |
| Enter new mailing address if applicables | | | | | |
| Enter new mailing address, if applicable: | - | - | | | |
| (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> _ | | _ | | |
| | - | | | | |
| | | | | | |
| B. If amending the registered agent and/ registered agent and/or the new registered of | | e address on our records | , <u>enter</u> | the nam | ie of the nev |
| registered agent and/or the new registered of | ince address here. | | | | |
| | LUIS BETHENCO | ALIRT. | | | |
| Name of New Registered Agent: | LOIS BETTENCE | | | | - |
| New Registered Office Address: | 2333 BRICKELL | AVENUE, SUITE D-1 | | | |
| | | Enter Florida street addres. | s | | |
| | MAMI | Flo | orida ³³¹ | 129 | |
| | | City | | Zip Co | de |

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 Begistered Agent, Signature of New Registere 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 = Ma $AMBR = Au$ | anager athorized Member | | |
|----------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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Filing Fee: \$25.00