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COVER LETTER

	legistration Sec Division of Corp			
SUBJECT		INVESTMENTS, LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclos	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ım all correspoi	ndence concerning this matter	to the following:	
		ISADORA GAVIRIA		
			Name of Person	
		16-CINCO INVESTMENT	TS, LLC	
			Firm/Company	
		2930 CATALINA STREE	T	
			Address	
		MIAMI, FL 33133		
			City/State and Zip Code	<u>.</u>
		E-mail address: (OM to be used for future annual report notif	ication)
For further	r information co	oncerning this matter, please ca	ail:	
EDUARD	OO OTTENGO		305 987-6361 at ()	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed i	s a check for the	e 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

16-CINCO INVESTMENTS, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	oany were filed on SEPTEMBER 25, 2009	9 and assigned
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 1	.iability Company," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		Siles.
		7
	1 60 11	200
3. If amending the registered agent and/or registered agent and/or the new registered office address		ter the name of the
		
Name of New Registered Agent:		OR PROPERTY.
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zin Code
	(11))	An 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>	Address	Type of Action
MGR	HIRAN A GAVIRIA	800 Claughton Island Dr., Apt. 704	□ Add
		Miami, FL 33131	™ Remove
			☐ Change
MGR	ISADORA GAVIRIA	2930 Catalina Street	✓ Add
		Miami, FL 33133	Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Adda SE
			Refflove
			CORNEL AND
			□ Remove
			□ Change
			Add
			□ Remove

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	y.)	
	·	
		
<u> </u>		
		77 5
	7.5	9
Effective date, if other than the date of filing: September 7, 2017 (optional)	3333	7
(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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date	.) Pursiiant	te 605.0207 be listed as
document's effective date on the Department of State's records.	95. 15. 15. 15. 15. 15. 15. 15. 15. 15. 1	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m.	on the	'C earlier of
The 90th day after the record is filed.	On the	earlier or
AUGUST 31 2017		
Dated Access 51 , 2017		
then!		
Signature of a member or authorized representative of a member		
HIRAN A. GAVIRIA HIMM (FAVI) KA		
Typed or printed name of signee		•

Page 3 of 3

Filing Fee: \$25.00

-> COPY (IF NEEDED) <--

Division of Con	rporations		
16-CINCO	INVESTMENTS, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
	Amendment and fee(s) are sub		·
	ISADORA GAVIRIA		
		Name of Person	
	16-CINCO INVESTMEN	TS, LLC	
		Firm/Company	
	2930 CATALINA STREE	ET	
		Address	
	MIAMI, FL 33133		
		City/State and Zip Code	
	E-mail address: (DM to be used for future annual report notificat	ion)
For further information c	oncerning this matter, please c		,
EDUARDO OTTENGO	1	305 987-6361	
Name o	f Person	Area Code Daytime Te	lephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	STREET/COURIER	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

16-CINCO INVESTMENTS, LLC			
(Name of the Limited (A	Liability Company as it now appears on our Florida Limited Liability Company)	records.)	
The Articles of Organization for this Limited Liab	oility Company were filed on SEPTEME	BER 25, 2009	_ and assigned
Florida document number L09000093065	······································		
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liability company here:		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation	n "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicab	le:	<u></u>	
(Principal office address MUST BE A STREET	ADDRESS)		
	 		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>	#16 	<u> </u>
		200	S
		5	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, enter the	
registered agent and/or the new registered office	e address here.	دن سا المح	3
Name of New Registered Agent:		88	89 C
Name of New Registered Agent.		3>	
New Registered Office Address:	Enter Florida street		
	Enter r torida street	aaaress	
	City	, Florida	Zip Code
	City		LID CORE

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:

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	HIRAN A GAVIRIA	800 Claughton Island Dr., Apt. 704	
		Miami, FL 33131	E Remove
			☐ Change
MGR	ISADORA GAVIRIA	2930 Catalina Street	⊠ Add
		Miami, FL 33133	🗆 Remove
			Change
			□ Remove
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If an effective date is Note: If the date:	f other than the data listed, the date must be sinserted in this block of ive date on the Depart	specific and o does not me	cannot be prior cet the applic	to date of filing able statutory t	or more than 90 day	ys after filing.) Pur	suant to 605.02 not be listed a
	ifies a delayed eff y after the record		ate, but no	t an effectiv	ve time, at 12	::01 a.m. on t	the earlier
The 90th Bay							
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AUGUST	- In	ature of a m	ember or autho	orized represente	tive of a member		

Page 3 of 3

Filing Fee: \$25.00