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SECRETARY OF STATE
DIVISION OF CORPERATIONS

12/20/10--01023--015 **25.00

T. HAMPTON

DEC 21

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Nata 3 I Su Investments UC 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:
Diego F. Cerrion Name of Person
. Firm/Company
3701 Kunquat Ave
City/State and Zip Code Diego Carrion 0816@ Under Committee Commi
For further information concerning this matter, please call:
Name of Person at (786) 715-5713 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION DIVISION OF CORPORATIONS **OF**



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Nata ? Is	a Investment's LC			
(<u>Name of the Limited L</u> (A F	ability Company as it now appears on our records.) lorida Limited Liability Company)			
The Articles of Organization for this Limited Liab	oility Company were filed on 12/11/2009 and assigned			
Florida document number 10900118	<u>5061</u> .			
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	ne limited liability company here:			
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET.	ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	DX)			
	<u> </u>			
	registered office address on our records, enter the name of the new			
registered agent and/or the new registered office	e address here:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
•	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title Name Address Type of Action

<u>MGR</u>	Luz	Bolivar	3701 Kunguat Ave Miami, FL 33133:	Add Remove
			·	Add Remove
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				Add Remove
D. If amendi	ing any other i	nformation, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_ 9
				SECKETARY /ISION OF OU
	2/15/2	910 ,		PH 29 TO
-		_	or authorized representative of a member	
-		Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00