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S. YOUNG

SECRETARY OF STATE .
TALLAHASSEF. FLORIDA

COVER LETTER

Div	ision of Corp	ocrations				
SUBJECT:	NAZ INVES	STMENTS, LLC				
SCHOLCI.		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspor	dence concerning this matter	to the following:			
		Nelson Taracido				
			Name of Person			
		Nelson Taracido P.A.				
			Firm/Company			
	8700 West Flagler St. Suite 170					
			Address		Ĩ	SEC
		Miami, FL 33174			17 JEN 30	PAR Set
		- · - ·	City/State and Zip Code		ယ္ထ	Ser
		nelson@ntpalaw.com			-0	250
		E-mail address: (to be used for future annual report notificat	ion)	PH S	
For further in	nformation co	ncerning this matter, please ca	all:		5: 29	
Andres Koro	la		305 588-9779 at ()			77*
	Name of	Person		lephone Number		
Enclosed is a	a check for the	e following amount:				
■ \$25.00 F	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 Sta Certified Copy (additional copy is e	itus &	

MAILING ADDRESS:

Registration Section

TO:

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

NAZ INVESTMENTS, LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on 06/09/2010	and assigned
Florida document number L10000062383		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or	the abbreviation "L.L.C." (n
Enter new principal offices address, if applicable:		こに記
(Principal office address MUST BE A STREET ADDRESS)		# :
		0 444
		79 . TT. S
Enter new mailing address, if applicable:		ा इन
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		nter the name of the nev
registered agent and/of the new registered office address in	е.	
Name of New Registered Agent:		****
New Registered Office Address:		
new Registered Office Address.	Enter Florida street address	
	. Florid	a
	City	Zin 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
MGRM	Noris Aguirre Zambra	382 NE 191 St. #46180	☐ Add
		Miami, FL 33179-3899	■ Remove
			Change
MGRM	Alfredo P. Aguirre	382 NE 191 St. #46180	Add
		Miami, FL 33179-3899	■ Remove
			Change
AMBR	Noris J. Aguirre Zambrano	382 NE 191 St. #46180	Add ⊋∽
		Miami, FL 33179-3899	
			Change Total
AMBR	Alfredo J. Pierantoni Aguirre	382 NE 191 St. #46180	- 5 9 A
		Miami, FL 33179-3899	□ Remove
			Change
			□ Add
			Remove
			□ Add
			Remove
			Change

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	JAN 30
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	29
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or other. If the date inserted in this block does not meet the applicable statutory fil cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier
ated January 25 , 2017	
Your Q &	
Signature of a member or authorized representation	ive of a member

Page 3 of 3

Filing Fee: \$25.00