

Jun. 27. 2018 1:57PM

6/27/2018 9:32:31 AM PAGE 1/001 Fax Server



June 27, 2018

FLORIDA DEPARTMENT OF STATE Division of Corporations

FLUXINVEST, LLC 6205 BLUE LAGOON DRIVE SUITE 130 MIAMI, FL 33126US

SUBJECT: FLUXINVEST, LLC , REF: L10000101798

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Vertical line going through application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II FAX Aud. #: E18000188995 Letter Number: 818A00013327

(_____ \sim 700 100 4 5 - 19 4 5 - 19 œ \odot

P.O BOX 6327 - Tallahassee, Flonda 32314

Jun. 27. 2018 1:58PM

.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLUXINVEST LLC

(A Florida Limited Liability Company 25 it non appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Se	sptomber 29th, 2010	and assi	igned.	
Florida document number 1.10000101798			2018	
This amendment is submitted to amend the following:			6 6	61.8 STA.
A. If amending name, enter the new name of the limited liability company h	—	•••• •••	¥27	دعت دین رود رو
The new name must be distinguishable and contain the words "Limited Liability Company." the o	designation "LLC" or the abbrev	ialion TL.I	LC <u>3r</u>	2
Enter new principal offices address, if applicable:		ця	œ	_
(Principal office address MUST BE A STREET ADDRESS)	·	£		-
Enter new mailing address, if applicable;				-
(Mailing address MAY BE A POST OFFICE BOX)	·····		<u> </u>	_
B. If amending the registered agent and/or registered office address of registered agent and/or the new registered office address here:	π our records, <u>enter the</u>		<u>of the</u>	new

Name of New Registered Agent:		
New Registered Office Address:	Enser Floridu street cik	irep:
	Cip	Florida Zir 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 affice address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Reststered Agent

Page 1 of 3

Jun. 27. 2018 - 1:58FM

.

(jeza.

<u>ن</u>د. بند.

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>	Name	Address	Type of Action
MGR	Pedro Ignacio Maggi	6205 Blue Lagoon Dr., Ste 130	🖻 Add
		Miami, FL 33126	Remove
			D Change
MGR	José Luis Suntarcieri Marinoni	6205 Blue Lagoon Dr., Ste 130	🗃 Add
		Miani, FL 33126	
		<u> </u>	O Change
			Add
			Remove
			Change
<u> </u>			Q Add
			Change
·	······		D Add
		·	C Remove 32
		·	



. .

. . .

. ...

. .

..

. .

Jun. 27. 2019 1:58PM

.

.

ļ

. .

×----

Ъ

.

	Pedro Ignacio Maggi		Typed or prints	d name of signce		·	1 7 Bits ares
	Paim Inneio Mauri		menaber printio	rized représentative of	a member	2 . 2	- , r
Dated	е 26ф		2018	-		>	
the record) The 90	d specifies a delay th day after the m	ed effective of ecord is filed.	date, but not	an effective tim	e, at 12:01 a.	m. on the e	arlier
<u>Note:</u> If 0 document?	he date inserted in this is effective date on the	block does not a Department of 3	meet the applica State's records.	ble statutory filing re	quirentents, this	date will not be	listed a
Effective (1) an effective	date, if other than t to unte is listed, the dute n	he date of filin nust be specific and	g: d cannot be prior t	o dere of filling or more	(option than 90 days after f	tal) iling.) Pursuant to	605,02
<u>.</u>		·	· •			<u>_</u>	
<u></u>							
		<u> </u>				<u> </u>	<u> </u>
_				- <u>u</u>			
				<u> </u>			
		·······					··
		·	-	<u> </u>	·		
~_			<u> </u>				
					. <u>.</u>		<u> </u>
							
	······································		·				<u> </u>
	······································			<u> </u>			