9/24/208 = 5. 24. 2018 4:22 FM

No. 1161 P. 1

merit Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H18000278421 3))) H180002784213ABC0 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. . دري To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : INCORPORATING SERVICES FL Account Number : I20050000052 Phone : (850)656-7956 RECEIVED 5 Fax Number : (850)656-7953 5 SEP 2.4 20:8 **Enter the email address for this business entity to be used for future Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLUXINVEST, LLC

Certificate of Status	0
Certified Copy	0,
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

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Sep. 24. 2018 4:22PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLUXINVEST, LLC	·
(Name of the Limited Liability Company as it now appears on our re (A Florida Limited Lability Company)	<u>cords.</u> j
te Articles of Organization for this Limited Liability Company were filed on	and assigned
orida dozument number	
his amendment is submitted to smend the following:	
. If amending name, enter the new name of the limited liability company here:	1
to new mame must be distinguishable and contain the words "Limited Liability Company," the designation	"LLC" or the abbreviation "T. I."
nter new principal offices address, if applicable:	2 1
Principal office address MUST BF. A STREET ADDRESS	
	<u></u>
	5 F
nter new mailing address, if applicable:	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here;

		Florida
New Registered Office Address:	Enter Florida street address	
Name of New Registered Agen:		

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.

It Changing Registered Agent, Signature of New Registered Agent

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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

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Title	Name	Address	Type of Action
MGR	BRAUN, CARLOS MARCELO	6205 BLUE LAGOON DRIVE SUTTE 130	bbA 🛛
		MIAMI, FL 33126	🖻 Rensove
			Change
<u></u>			D Add
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			D Remove
			Change



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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective cate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated_	Jeptembre 24th 2018
	Signature of a mentitier or autionized representative of a mention
	PEDRO I, MAGGI
	Typed or printed name of signee

Filing Fee: \$25.00

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