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COVER LETTER

A Company of the Company

Tallahassee, FL 32314

TO:	Registration Se Division of Cor			
SUD IE		TO INVESTMENT, LLC		
SUBJEC	∠I; <u> </u>	Name of Lin	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		MARIA EUGENIA DIAZ		
			Name of Person	
		MED ACCOUNTING SE	RVICES, LLC	
			Firm/Company	
		4468 DOGWOOD CIRCL	Æ	
			Address	
		WESTON, FL 33331		
		-	City/State and Zip Code	
		mariu@medaccountingserv	ices.com to be used for future annual report no	
For furth	er information c	concerning this matter, please c	·	ATTICALITY!
MARIA	E DIAZ		954 295 - 6585	
	Name o	r Person	at () Area Code Dayti	me Telephone Number
Enclosed	l is a check for th	he following amount:		
□ \$ 25.	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration 5		Street Address: Registration S	ection
	Division of C		Division of Co	orporations
	P.O. Box 632	7	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PALO ALTO INVESTMENT, LLC		
(<u>Name of the Limited Lial</u> (A Floi	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability		and assigned
Florida document number L10000107716	<u></u> .	
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the li</u>	imited liability company here:	
The new name must be distinguishable and contain the words "I	.imited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		285
B. If amending the registered agent and/or registe		me of the new registere
agent and/or the new registered office address here	<u>2</u> :	To the state of
		· 公司 芸
Name of New Registered Agent:	····	200 75
New Registered Office Address:		63. C8
	Enter Florida street address	
	, Florida	
	Cin	Zin Coda

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	JUAN CAMILO JARAMILLO	1347 VERACRUZ LANE,	□Add
		WESTON , FL 33327	■Remove
			□Change
MGRM	MARTHA L GUTIERREZ	1347 VERACRUZ LANE	□Add
		WESTON, FL 33327	■Remove
			□Change
MGRM	CAMILA JARAMILLO	1347 VERACRUZ LANE	□Add
		WESTON, FL 33327	■Remove
			☐Change
MGRM	MARCELLA JARAMILLO	1347 VERACRUZ LANE	🗆 Add
		WESTON, FL 33327	■Remove
			□ Change
			□ Add
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Tective date, if other than the one effective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	ck does not meet the applicab	date of filing or more than 90 le statutory filing requires	(optional)) days after filing.) Pursuant to 6 nents, this date will not be I	05.020 isted as
cord specifies a delayed effective s filed.	date, but not an effective time	e, at 12:01 a.m. on the ear	lier of: (b) The 90th day at	fter the
June 15	2023			
	,	. '		
4//	1/			

Filing Fee: \$25.00