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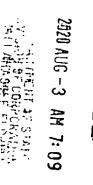
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SEP 2.2 2020 S. YOUNG



COVER LETTER

	Registration 3 Division of C		é '	
SURIFC	rr. Meta C	Capital, LLC	•	
30031,0		Name of Lin	nited Liability Company	
The enclo	osed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
		pondence concerning this matter	_	
			Felix R. Castillo	
			Name of Person	
		Biscayı	ne Business Management, I	nc
			Firm/Company	
		4000 P	once De Leon Blvd., Suite 4	120
			Address	
		<u> </u>	Coral Gables, FL 33146	
		Felix@	City/State and Zip Code Ocastilloandcompany.com	
			(to be used for future annual report i	notification)
For furthe	er information	concerning this matter, please of	all:	
		R. Castillo	at (_305)	556-0167
	isame	or reison	Area Code Day	time Telephone Number
Enclosed	is a check for	the following amount:		
፟ \$25.0	00 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 Status & Certified Copy (additional copy is enclosed)
	Mailing Addr Registration		Street Address: Registration	=
I	Division of	Corporations	Division of C	Corporations
}	² .O. Box 63	27	The Centre o	f Tallahassee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

믕

Meta Capital, LLC		TO THE RESERVE OF THE PARTY OF	l
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	Time Co	- -
The Articles of Organization for this Limited Liability Company	were filed on06-20-2011	A Cand assigned	じつ
Florida document number <u>L11000071118</u> . This amendment is submitted to amend the following:		7:09	
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	ne abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:	4000 Ponce De Leon Blvd.		_
(Principal office address MUST BE A STREET ADDRESS)	Suite 415 Coral Gables, FL 33146	 	-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			- -
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the r</u>	name of the new registe	ered
Name of New Registered Agent:			_
New Registered Office Address:	Enter Florida street address		-
	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		-117 5500	

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
MGR	Zuloaga, Guillermo	250 Bird Road, Suite 200	□Add
		Suite 200	☑ Remove
		Coral Gables, FL 33009	Change
MGR	Echevarria, Oscar	250 Bird Road	□Add
		Suite 200	⊠Remove
		Coral Gables, FL 33009	Change
MGR	Zuloaga Siso, Guillermo	4000 Ponce De Leon Blvd.	□ Add
		Suite 415	□Remove
		Coral Gables, FL 33146	Machange
MGR	Capriles, Martin	4000 Ponce De Leon Blvd.	🗆 Add
		Suite 415	🗀 Remove
		Coral Gables, FL 33146	⊠ Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
			∏Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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Note: 1	ye date, if other than the date of filing:
e record rd is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	7/13/10
	Signature of a member or authorized representative of a member
	\mathcal{L}
	Typed or printed name of signee

Filing Fee: \$25.00