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COVER LETTER

Division of Co	orporations		
DIO INV	ESTMENTS, LLC		
SOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Robert Diaz		
		Name of Person	
	Dio Investments, LLC		
		Firm/Company	
	6650 Treeland Avenue Su	ite B	
-		Address	
•	Largo, FL 33773		
•		City/State and Zip Code	
	americanleasing l@yahoo.c	to be used for future annual report not	dication)
For further information	concerning this matter, please concerning	·	···················
Robert Diaz		727 330-4816	
Name of Person		at () Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 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 ADDRESS:

v ,

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

A DESCRIPTION OF THE PROPERTY OF THE PARTY.

	TMENTS, LLC					
(Name of the Limit	(A Florida Limited)	i <mark>nv as it now appears on our rec</mark> Liability Company)	<u>:ords.</u>)			
The Articles of Organization for this Limited Liability Company were filed on 6/22/2011 Iorida document number L11000072737		and assigned				
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here:				
The new name must be distinguishable and contain the v	ords "Limited Liabi	lity Company," the designation "l	LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		6650 Treeland Avenue	<u> 20 - </u>			
(Principal office address MUST BE A STREE	T ADDRESS)	Suite B	8 A			
		Largo, FL 33773	5 T			
Enter new mailing address, if applicable:		6650 Treeland Avenue	SPECIFICATION TO THE SPECIFICA			
(Mailing address MAY BE A POST OFFICE BOX)		Largo, FL 33773	2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
3. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:			ords, enter the name of the			
New Registered Office Address:	6650 Treeland	Avenue Suite B				
New Negastrica Office Address.	Enter Florida street address					
	Largo	<u> </u>	. Florida <u>33773</u>			
		City	Zip 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Robert Diaz	6650 Treeland Ave Suite B Largo, FL 33773	□ Add
-			□ Remove
			Change
MGR	Manager LLC	- -	Add
		1560 West Cleveland Street Tampa, FL 33606	Remove
			☐ Change
· · · · · · · · · · · · · · · · · · ·			Add
			18 Demove
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Tective date, if other than the an effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the December 1.	the specific and cannot be sek does not meet the	pe prior to date of fi applicable statute	ling or more than '		ing.) Pursu		
e record specifies a delayed The 90th day after the reco		ut not an effe	ctive time, a	t 12:01 a.r	n. on th	e earl	lier d
August 23	2018	·					
Post							
	Signature of a member of	or authorized repre	sentative of a mer	iber			

Page 3 of 3

Filing Fee: \$25.00