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To:

Division of Corporations

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From:

Account Name

: R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090

: (305)358-1310

Fax Number

: (305)503-6701

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LETCAS 827288 INVESTS LLC

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## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

LETCAS 827288 INVES	TS LLC	
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited Liability Company	were filed on 10/06/201	I and assigned
Florida document number L11000114763		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		77. 22
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		2
B. If amending the registered agent and/or registered office	address on our records	~~~
agent and/or the new registered office address here:		
		<del>(</del> )
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	ei address
	, Florida	
<del></del>	City	, FloridaZip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete	ree to act in this capaci e performance of my du	ty. I further agree to comply with the ties, 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 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

Title	<u>Name</u>	Address	Type of Action
MGR	John Jairo Salazar Salazar	11231 NW 20 ST UNIT 141	≅Add
		MIAMI, FL 33172	□Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Change
			□Add
			Remove
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Note: If the date inserted in this	the date of filing:  must be specific and cannot be prior to s block does not meet the applicable Department of State's records.	date of filing or more than 90 days after filing le statutory filing requirements, this date	g.) Pursuant to 605.0207 (
the record specifies a delayed effe word is filed.	tive date, but not an effective time	e, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated JANUARY 21	2020		
Pot	Castaño		•
Jenere	Signature of a member or authoriz	red representative of a member	
	LETICIA MARI	A CASTANO	
	Typed or printed		