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.

(((H230002072843)))



H230002072843AB0

Note: DO NOT hit the REFRESH/RELOAD by	ution on your browser from this page
Doing so will generate ano	

To:

Division of Corporations

To:

Fax Number

: (850)617-6383

From:

Account Name : MENDEZ ACCOUNTAX SERVICES, CORP

Account Number : I20060000145 Phone : (305)769-4936

Fax Number : (305)769-1844

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				
					•

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MODOLU INVESTMENT, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

S. ROEERTS

Electronic Filing Menu Corporate Filing Menu

JUN 14 2022 Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

To:

MODOLU INVESTEMN	†, LLC.
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were for Florida document number L12000026986	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Con	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	73
<u> </u>	
	7
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	5.5
	?;2
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here: Name of New Registered Agent:	on our records, <u>enter the name of the new registered</u>
New Registered Office Address:	Enter Florida street address
	, Florida
Cit	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to a provisions of all statutes relative to the proper and complete perfor accept the obligations of my position as registered agent as provide being filed to merely reflect a change in the registered office addressing of this change.	mance of my duties, and I am familiar with and do for in Chapter 605, F.S. Or, if this document is
If Changing Re	gistered Agent, Signature of New Registered Agent

To:

MGR = N AMBR = A	lanager authorized Member		
<u> Citle</u>	Name	Address	Type of Action
AMBR	ANTONIO MORANA	11318 NW 47 LANE	□Add
		DORAL FL 33178	■Remove
			□Change
MBR	GIOVANNI MORANA	1561 HARBOUR SIDE DR	≣Add
		WESTON FL 33326	□Remove
			☐ Change
			□Add
			Remove
			Change
			□ Add
			□Remove
			☐ Change
			□Add
			□ Remove
			Change
			□Add
			□Remove

. LI AM	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
•	
_	
•	
-	
(If an eff	ive date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recor	d 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 led.
Dated	JUNE 8 , 2023 .
	Signature of a member or nuthorized representative of a member
	ANGELA LUCCHESE