112000088192

(Ke	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
	ty/State/Zip/Phone	o #0
(Cit	.y/State/Zip/Prione	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Ďo	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200331378192

07/01/19--01007--020 +-20.00

19 JUL -1 KH 8: 52 SLCKETAGE STATE

ML 13 THE SCHEDEDER

COVER LETTER

TO:	Registration Se Division of Cor		•				
SHR	ABBACO	INVESTMENT GROUP, LLC					
Name of Limited Liability Company							
The e	enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Pleas	e return all correspo	ondence concerning this matter	to the following:				
		JANINA VALBUENA					
			Name of Person	· · · · · · · · · · · · · · · · · · ·			
		2903 OAKBROOK DR	Firm/Company				
		WESTON FL 33332	Address				
		omarbetancourt69@hotmai	City/State and Zip Code				
		E-mail address: (to be used for future annual report notif	fication)			
For fi	urther information co	oncerning this matter, please c	all:				
JANI	NA VALBUENA	_	954 648-2667 at ()				
	Name of	f Person	Area Code Daytime	e Telephone Number			
Enclo	sed is a check for th	e following amount:					
■ S:	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:

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

(Name of the Limited	Liability Company as Florida Limited Liabili	it now appears ty Company)	on our records.)	
he Articles of Organization for this Limited Lial lorida document number £12000088192	oility Company were	filed on	07/06/2012	and assigned
nis amendment is submitted to amend the follow	ving:			
If amending name, enter the new name of t	he limited liability	company he	<u>re</u> :	
N/A				
e new name must be distinguishable and contain the wor	ds "Limited Liability Co	ompany," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		<u> </u>
rincipal office address MUST BE A STREET	ADDRESS)			
nter new mailing address, if applicable:		N/A		
failing address MAY BE A POST OFFICE B	<u> </u>			<u> </u>
				5 %
If amending the registered agent and/or gistered agent and/or the new registered office Name of New Registered Agent:	registered office ce address here: JANINA VALBUEN		our records, <u>ente</u>	r the name of the
	2903 OAKBROOK I			
New Registered Office Address:	2703 OARBROOK I		da street address	
	WESTON		, Florida <u>3</u>	3332
		Zity	, rioriua _	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, 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	OMAR BETANCOURT	2903 OAKBROOK DR WESTON FL 33332	
			Remove
			Add
			Remove
			Change
			Remove
			Change
			1 1
			Add Add
			5 2
			Change
			C Remove
			Change
			Remove
			□ Change

D. If amendin	g any other inforn	nation, enter c	hange(s) here:	(Attach addit	ional sheets, if n	ecessary.)	
			<u>-</u>				<u> </u>
						· - ·	
							
				<u> </u>	_ "		
							
_				<u>-</u>			
							
							- 7
		<u>-</u> _				no no	
			_	·	- ·	<u> </u>	8: [3 2
			06/19/2019			<u> </u>	
(If an effective Note: If the	ite, if other than the date is listed, the date in date in this effective date on the	ust be specific and block does not m	cannot be prior to	date of filing or r le statutory filin	nore than 90 days af	tional) ter filing.) Pursuant to his date will not be	o 605.0207 (3)(: listed as the
the record : The 90th	specifies a delayed day after the re	ed effective d cord is filed.	ate, but not	an effective	time, at 12:01	a.m. on the e	arlier of:
Dated	UNE 19	;	2019		1.		
-		Signature of a ri	comber or authori	hulled red representative	of a member		_
		Jani	na / Typed or printed	ubice n	a)		_

Page 3 of 3

Filing Fee: \$25.00