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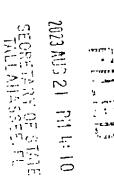
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: IC	6 Investme	mited Liability Company	
	Name of 1.1	тией Главину Сопралу	
The enclosed Articles of	Amendment and fee(s) are su	abmitted for filing.	
Please return all correspo	ndence concerning this matte	er to the following:	
	Ernest	Name of Person	
	IC6I	nvestment LLC Pirm/Company	
	66 West	Flugler Street	Suite 900
	Miami, F	City/State and Zip Code	TALL ANASSES FL
	I Ceinvest E-mail address:	ment 6 @gmail.	ication)
For further information c	oncerning this matter, please		경험 표
Ernest Is Name o	i do C f Person	at (305) 781- Area Code Daytime	5940 : Telephone Number
Enclosed is a check for the	ne following amount:		
12 \$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 Addres		Street Address:	
Registration S		Registration Sec	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IC 6 Investment	+ LLC			
IC 6 Investment (Name of the Limited Liability (A Florida)	ity Company as it now appears or a Limited Liability Company)	our records.)	•	
The Articles of Organization for this Limited Liability C Florida document number <u>L12000138719</u>	Company were filed on <u>11</u> -	-02-2012	_ and a	ssigned
This amendment is submitted to amend the following:	d Liability Company here: d Liability Company." the designation "LLC" or the abbreviation "L.L.C." SSS)			
A. If amending name, enter the new name of the lim	ited liability company here:			
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the desig	nation "LLC" or the abbre	viation "	L.L.C."
Enter new principal offices address, if applicable:	·			
(Principal office address MUST BE A STREET ADDR	RESS)	<u></u>	2f(2	 ,
	<u> </u>	بتة -		
		<u> </u>	<u> </u>	7 129 1 129 2 129 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable:		芸芸	12	3
(Mailing address MAY BE A POST OFFICE BOX)		o O m tu	2	111
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		. 4		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our reco	rds, <u>enter the name o</u>	f the n	ew registere
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	City		Zip Cod	e

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	Michou Christin	66 West Flagler St	Add
		Svite 900, Miami,	□Remove
		FL 33130	□Change
			🗖 Add
			□Remove
			□Change
		TALLAHA	Add Remove 2 DChange
		SSEE, F.	□ Change
			□Remove
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ctive date, if other than the date of filing:	(optional of filing or more than 90 days after filing) g.) Pursuant to 605.0;
If the date inserted in this block does not meet the applicable statement's effective date on the Department of State's records.	tutory filing requirements, this dat	e will not be listed
·		
ord specifies a delayed effective date, but not an effective time, at 1	2:01 a.m. on the earlier of: (b)	he 90th day after ti
filed.		
d 10-30-≥es		
d 10-30-30-2 Event Man. Signature of a member or authorized rep		
Emport is soulos		
Signature of a member or authorized ear	procentative of a member	