	300		555
(Requestor's N	Name)		
(Address)			
(Address)		_ 30	00250224323
(City/State/Zip	p/Phone #)	-	
(Business Ent	tity Name)	-	
(Document N	umber)	-	07/31/1301029002 **2S.00
ertified Copies Cert	tificates of Status		_
Special Instructions to Filing Offic	cer:		HOUL ANASSEE
Office L	Use Only		

COVER LETTER

TO:	Registration Section
	Division of Corporation

SUBJECT:

IPARI INVESTMENTS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALVARO CASTILLO

Name of Person

ALVARO CASTILLO B. P.A.

Firm/Company

1390 BRICKELL AVENUE, SUITE 200

Address

MIAMI, FLORIDA

City/State and Zip Code

alvaro@alvarocastillopa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alvaro Castillo

Name of Person

305,**371-5540**

Area Code & Daytime 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)

13 JUL 31 M 4: 23

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

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

	City	, Florida Zip Code
New Registered Office Address:	Enter F	lorida street address
New Registered Office Address		
Name of New Registered Agent:		

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 608, 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

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

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· <u>Title</u>	Name	Address	Type of Action
MGR	LUIS CANALES	10715 NW 75 STREET	Add
		MIAMI, FL. 33178	Remove
MGR	TONY NAZARO	10715 NW 75 STREET	🖌 Add
		MIAMI, FL. 33178	Remove
			Add
			Remove
•	7. 12 3		Add
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			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Dated Dureni Signature of nber or authorized representative of a member ant DOMENICO BUCETI Typed or printed name of signee Page 3 of 3 ċ

Filing Fee: \$25.00

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