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COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT: Zuos	Rivera Investm Name of Limite	neits, LLC ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	Rosa HIlda	Salinas Name of Person	
		a Juvestments, LLC Firm/Company	
	2422 Nw	87PL Address	
	Miami, F	L 33/ 7Z City/State and Zip Code	7.65 21 7.75 7.75 7.75 7.75 7.75 7.75 7.75 7.7
	Yhsalinas646h E-mail address: (10	of mail com be used for future annual report notification	2013 NOV 12
For further information con	ncerning this matter, please ca		
Posa HIIda Name of I	Salinas Person	at (<u>786) 357 87</u> Area Code & Daytime Tel	90 ephone 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)	☐S60.00 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

Rios Rivera Inje	strents 110	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 02/25/2013	and assigned
Florida document number <u>L 130000 28983</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limit"L.L.C."	ited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	2422 NW 87 PL	Hiami, FE 33172
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:	2422 NW 87PL Hia	vi, F/-33742
(Mailing address MAY BE A POST OFFICE BOX)		132 T
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		r the name of the new
Name of New Registered Agent: High	Equities, LLC	
New Registered Office Address: 10773)	VW 58Th ST # 225	
	Enter Florida street a	ddress
	Doral , Florida .	33178
	<i>0,</i>	Lip 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 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 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 **Type of Action** <u>Title</u> <u>Name</u> **Address** Pachero And Associates, LIC 2422 NW 87PL Niami, FL 33172 MGRM Remove Remove Remove Remove Remove Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Add FEIN # 37 1719957
Dated	November 7, 2018.
	Signature of a member of authorized representative of a member
	Rosa HIlda Salinas Typed or printed name of signee
	<i>y</i> • • • • • • • • • • • • • • • • • • •
	Page 3 of 3
	Filing Fee: \$25.00

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