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To:

3059339393

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : I20000000083 : (305)932-6262 Phone : (305)933-9393 Fax Number

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

INFO @ Serberlaw firm, com Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAGARDI INVESTMENTS LLC

A PROPERTY OF THE PROPERTY OF

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAGARDI INVESTMENTS LLC	<u></u>	
(Name of the Limited Limbilion (A Florida	ty Company as it now appears on our re	ecords.)
The Articles of Organization for this Limited Liability C		
Florida document number L13000071464	<u> </u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the words "Li	mited Lisbility Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	20
Truck of Miles		
		. 6
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
		Si Ci
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our re dress here:	cords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree:	address
		. Florida
	City	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

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

MGR = Manager AMBR = Authorized Member

<u>Títie</u>	<u>Name</u>	Address	Type of Action
MGR	ARISTOBULO HOLDINGS S.A	3401 SW 160 AVE, SUITE 330	□ Add
		MIRAMAR, FL 33027	⊟ Remove
MGR	Benedicto, LLC	3401 SW 160 Ave., Suite 330	
		Miramar, FL 33027	C Remove
			201@AUS
	•		□ Remove
			_⊡ ४ట్లో - స
			_□ Remove
			Add
			_ Remove
			_ _□ Add
			_□ Remove
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. If amending any other information, enter change(s)	here: (Attoch additional sheets, if necessary.)
	<u> </u>
Effective date, if other than the date of filing: (The effective date must be specific, council be prior to date of receip the date this document is filed by the Florida Department of State)	(optional) tor filed date and cannot be more than 90 days utler
Dated Agustust 14 201	9 .
(P'MOOL)
Horacio Edgardo Viale	authorized representative of a member
Typed or	printed name of signer

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