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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FINANCIAL BUSINESS TNVESTMENTS 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:
JEAN PIERRE BRUNOIS Name of Person
FINANCIAL BUSINESS INVESTMENTS LUC Firm/Company
1717 N. BAYSHORE DR # 3847
MIAMI FL 33132 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TEAN PIERRE BRUINDIS at (186) 502-1842 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

FINANCIAL BY	18 NESS ed Liability Compa (A Florida Limited	ANY EST MENTS LLC any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li Florida document number 113000955	ability Company		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	bility company here:	
The new name must be distinguishable and end with the v	words "Limited Lial	bility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applica		1717 N. BAYSHOPE DR # 3847 MIAMI, FL 33132	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE A	<u>BOX)</u>	1717 N. BAYSHOPE DR #3847 MINMI ,FL33132	
B. If amending the registered agent and/registered agent and/or the new registered of		office address on our records, enter the name of the	e new
Name of New Registered Agent:	JEAN-	MARC PICCO	
New Registered Office Address:	1717 1	J. BAYSHOLE DR # 3817 Enter Florida street address	
	MIAMI		::
New Registered Agent's Signature, if changing F	Registered Agent:	<u>:</u>	
		ree to act in this capacity. I further agree to comply wi e performance of my duties, and I am familiar with and	

If Changing Registered Agent, Signature of New Registered Agent

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 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 = M $AMBR = A$	Luthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u></u>		Add
			Remove
			☐ Remove
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	e date, if other than the date of filing: (optional) we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after its document is filed by the Florida Department of State)
the date th	is document is filed by the Florida Department of State)
the date th	is document is filed by the Florida Department of State)

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Filing Fee: \$25.00