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• / (F	Requestor's Name)							
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(E	Business Entity Name)							
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COVER LETTER

TO: Registration Sec Division of Corp									
EDAN INVI	ESTMENTS GROUP LLC								
SUBJECT:	Name of Limi	ited Liability Company							
		3							
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.							
Please return all correspon	dence concerning this matter	to the following:							
	Isaac Manzo	•							
		Name of Person	A1E (EU)						
. Manzo and Associates P.A.									
		Firm/Company							
	4767 New Broad St.								
		Address	· ——						
	Orlando, FL 32814								
	•	City/State and Zip Code							
	Manzo@lawyer.com								
	E-mail address: (to be used for future annual report notific	cation)						
For further information con	ncerning this matter, please ca	all:							
Isaac Manzo		407 514-2692 at ()							
Name of	Person		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)						

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

EDAN INVESTMENTS GROUP L		,	
(Name of the Limite	d Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li	ability Company	were filed on 10/21/2013	and assigned
Florida document number L13000148037	,		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
n/a			Victoria de la companya della companya della companya de la companya de la companya della compan
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L/L,C."
Enter new principal offices address, if applica	able:	4767 New Broad St.	all of
Principal office address MUST BE A STREE	T ADDRESS)	Orlando, FL 32814	
Enter new mailing address, if applicable:		10524 Moss Park Road, Suite 204-332	
(Mailing address MAY BE A POST OFFICE BOX)		Orlando, FL 32832	
B. If amending the registered agent and/oregistered agent and/or the new registered of			he name of the new
Name of New Registered Agent:	n/a		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	n/a		
		Enter Florida street address	
	n/a	, Florida ^{n/a}	
		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.

n/a	
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
MGR	Mariana O. Ramirez de Luigi	10108 Cypress Vine Dr.	Add
•		Orlando, FL 32827	Remove
			Change
MGR	Eduardo Isava	10108 Cypress Vine Dr.	□ Add
		Orlando, FL 32827	■ Remove
			□ Change
MGR	ALDERNEY LLC	10524 Moss Park Road,	Add Co
		Suite 204-332	□ Remove
		Orlando, FL 32832	□ Change
			□ Add
			☐ Remove
,			Change
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	ord specifies a d 90th day after th			ite, but	not an	effectiv	e time,	at 12:0	1 a.m.	on the	earlier
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Page 3 of 3

Filing Fee: \$25.00