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COVER LETTER

TO:

Registration Section
Division of Corporations

LUMEN INVESTMENT GROUP 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:

Linda M. Smith, Esq.

Name of Person

Law Offices of Linda M. Smith

Firm/Company

11900 Biscayne Boulevard, Suite 503

Address

Miami FL 33181

City/State and Zip Code

smithIm@comcast.net

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

For further information concerning this matter, please call:

Linda M. Smith, Esq.

..305,899-1415

Name of Person

Appa Codo

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)

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

	VESTMENT GROUP LL		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on a Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on Febr	uary 7, 2014	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and end with the words "Li	imited Liability Company," the desi	gnation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADD)	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TALLAHASSEE, TLO	FILED 2014 HAR 24 PH 12:
B. If amending the registered agent and/or registered agent and/or the new registered office add		ur records, <u>enter th</u>	e name of the ne
Name of New Registered Agent:			
New Registered Office Address:	Enter Floridu .	street 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

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

MGR = Manager

AMBR = Authorized Member **Address** Type of Action **Title** <u>Name</u> Esmeralda 1350 MGRM Gabriel R Dieguez Morales **■** Add Talagante Chile ☐ Remove 10910 Ella Lee Lane ANDRES NAUMKO MGRM Add Add Houston TX 77042 ☐ Remove □ Add ☐ Remove ☐ Add ☐ Remove □ Add

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Filing Fee: \$25.00