L14000023275

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(Address)

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TALLAHASSEE, FLORIDA

RAUL E. ESPINOZA, P.L.
Law Firm

7300 North Kendall Drive, Suite 520
Miami, Florida 33156
www.repalaw.com

Phone: 786.539.5410
Facsimile: 786.539.5411
Email: respinoza@repalaw.com

October 15, 2014

URGENT!

Via US Mail:
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Registration Section, Division of Corporations- Investrust Solutions, LLC

To whom it may concern,

Please see the attached executed, **Articles of Amendment to Articles of Organization, on behalf of Investrust Solutions, LLC**. Additionally, please find attached **check No. 402**, in the amount of **Twenty Five Dollars ($25.00)** made payable to Division of Corporations. As such, please process the aforementioned package.

Should you have any questions, please feel free to reach the undersigned.

Sincerely,

Vanessa M. Soler, Legal Assistant
Raul E. Espinoza, Esq.

REE/vs
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Investrust Solutions, 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:

Jonathan Lopez
Name of Person

Firm/Company

510 NW 84th Ave.
Address

Plantation, FL 33324.
City/State and Zip Code

jonathan.lopez@tumb.com.ve
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raul Espinoza at (786) 5395410
Name of Person Area Code 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

Investrust Solutions, LLC

(Name of the Limited Liability Company as it now appears on our records)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/11/2014 and assigned Florida document number L14000023275.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

510 NW 84th Ave.
Plantation, FL 33324.

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

7300 N. Kendall Dr.
Suite 520
Miami, Florida 33156

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address: 7300 N. Kendall Dr., Ste. 520.
(Enter Florida street address)

Miami, Florida 33156.
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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 16, 2014

_____
Signature of a member or authorized representative of a member

Jonathan Lopez
Typed or printed name of signer

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TALLAHASSEE, FLORIDA

Filing Fee: $25.00