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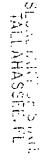
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PICK-UP WAIT MAIL
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## **COVER LETTER**

Division of Co.	porations		
Change REG.	AGENT FOR A IPO INVESTI	ments, LLC (Doc# 1	L140000 1396)
SUBJECT:			
	Name of Lim	ited Liability Company	_
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	NATALYA SABGA		
		Name of Person	<del></del>
	A.I.P.O. INVESTMENTS	LLC	
		Firm/Company	
	290 SW 112TH AVE		
		Address	
	Deerfield Beach FL 33432		
	hvernron78@hotmail.com	City/State and Zip Code & Natalya.SFOCap@gmail.com	
			· · · · · · · · · · · · · · · · · · ·
For further information a		to be used for future annual report not	incation)
Por further information of NATALYA SABGA	oncerning this matter, please c		
NAIALIA SABGA		,	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration Section Division of Corporations		Registration Se Division of Co	
P.O. Box 632		The Centre of	•
Tallahassee,			pe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN 16 AM 8: 30

A.I.P.O. INVESTMENTS LLC			5: n
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on Liability Company)	our records) - MICH J. S.L.
The Articles of Organization for this Limited I lorida document number	Liability Company	were filed on	014 and assigned
his amendment is submitted to amend the fol	llowing:		
. If amending name, enter the new name	of the limited liab	ility company here:	
he new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	•	
Principal office address MUST BE A STRE	ET ADDRESS)		
inter new mailing address, if applicable:			
<u>Mailing address MAY BE A POST OFFICE</u>	<u> BOX)</u>		
		<del></del>	
3. If amending the registered agent and/or gent and/or the new registered office address.		address on our recor	ds, enter the name of the new registe
Name of New Registered Agent:	BEAVER PROPERTIES , Inc.		
New Registered Office Address:	290 S.W. 12TH	AVE.	
	-	Enter Florida s	treet address
	DEERFIELD B	EACH	, Florida

## 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.

City

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
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Effective date, if other than t If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	nust be specific and c block does not me	annot be prior to d et the applicable			iling.) Pursuant to 60	
ne record specifies a delayed effectord is filed.	tive date, but not a	п effective time	at 12:01 a.m. on	the earlier of: (b)	The 90th day aft	er the
June 14 Dated		2022				
Dated	A.		•			
	Signature of a me	ember or authorize	ed representative of	a member		

Filing Fee: \$25.00