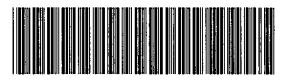
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K. SALLY EXMINER AUG 25

## **COVER LETTER**

TO:		istration Session of Cor					
etib ti	PCT.	YANC INV	ESTMENTS LLC				
SUBJI	LCI:	Name of Limited Liability Company					
The en	ctosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please	return	all correspon	ndence concerning this matter	to the following:			
			Yomari Hernandez				
			<del></del>	Name of Person			
				Firm/Company			
			1112 SE 3rd Avenue				
				Address			
			Ft. Lauderdale, FL 33316				
				City/State and Zip Code			
			N/A				
			E-mail address: (	to be used for future annual report notifi	cation)		
For fur	rther in	formation co	oncerning this matter, please or	all:			
Yoma	ri Herr	andez		786 543-0189			
		Name of	f Person	Area Code Daytime	Telephone Number		
Enclos	ed is a	check for th	e following amount:				
\$2	5.00 F	iling 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

## TO ARTICLES OF ORGANIZATION OF

F	LED
2016 ALIC C	
2016 AUG 2	3 AM //: 5/

		- < 3 AL
(Name of the Limited Liah	ollity Company as it now appears or	AUG 23 AM 11: 56  ALLAHASSEF, FLOOR
. (A rior	ida Limited Liability Company)	ALLAHASSYOFS
The Articles of Organization for this Limited Liability	Company were filed on May 1	, 2014 and assigned
	Company were more on	and sealing
Florida document number L14000070336	<del></del>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the it	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
	<u> </u>	
Enter new mailing address, if applicable:		
much men mamma admices in apparance		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
	gistered office address on o	ir records, enter the name of the n
B. If amending the registered agent and/or reg		or records, enter the name of the name
B. If amending the registered agent and/or reg registered agent and/or the new registered office ag		ır records, enter the name of the n
B. If amending the registered agent and/or reg		ir records, enter the name of the n
B. If amending the registered agent and/or reg registered agent and/or the new registered office ag	ldress here:	
B. If amending the registered agent and/or registered agent and/or the new registered office ad  Name of New Registered Agent:		
B. If amending the registered agent and/or registered agent and/or the new registered office ad  Name of New Registered Agent:	ldress here:	

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

## or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR <sub>.</sub>	Victor Manrique	1112 SE 3rd Avenue	□ Add
٠		Ft. Lauderdale, FL 33316	■ Remove
			☐ Change
AMBR	Yomari Hernandez	1112 SE 3rd Avenue	Add
		Ft. Lauderdale, FL 33316	□ Remove
			☐ Change
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			OF SO And So Remove
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Note: If the date inserted in	an the date of hing:ate must be specific and cannot be s	plicable statutory filing require	(optional) 90 days after filing.) Pursuant to 605.0207 (3 ements, this date will not be listed as th
the record specifies a do  o) The 90th day after the	elayed effective date, but ne record is filed.	not an effective time, a	t 12:01 a.m. on the earlier of:
August 1	2016		
3 .	Ma .	· · · · · · · · · · · · · · · · · · ·	
Χ	Signature of a member or	authorized representative of a men	nber
***		•	
Victor Manrique	Tomas and	rinted name of signee	
	r Aben or I	TOWN HOUSE OF STREET	

Page 3 of 3

Filing Fee: \$25.00