## L14000102797

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	<u> </u>	

Office Use Only



200318817722

10/01/18--01032--006 \*\*25.00

18 OCT - 1 AM ID: 25

N COOPER OCT 03 2018

## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:		INVESTMENTS, LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subi	mitted for filing.	
Please return	all correspon	dence concerning this matter t	to the following:	
		LUZ BIBIANA HEREDIA		
		<u></u>	Name of Person	<del></del>
			N' (1)	
		309 OAK SPRINGD DR	Firm/Company	
			Address	<u></u>
		DEBARY, FL 32713	, calc	
		HEREDIA.REALTOR@G		<del></del>
		E-mail address: (t	o be used for future annual report not	iffication)
For further in	nformation cor	ncerning this matter, please ca	di:	
LUZ BIBIAI	NA HEREDIA	<b>A</b>	386 837-3396	
	Name of I	Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 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** 

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability C	omnany as it now annears on our records )	<del></del>
(A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 06/26/2014	and assigned
Florida document number L1400010297		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	<u>liability</u> company here:	
N/A		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	
Enter new principal offices address, if applicable:	N/A	<b>18</b>
Principal office address MUST BE A STREET ADDRES	S)	130 130
		1 323
		원 경영 <b>급</b> 경영:
Enter new mailing address, if applicable:	N/A	
Mailing address MAY BE A POST OFFICE BOX)		25
3. If amending the registered agent and/or registere registered agent and/or the new registered office address		enter the name of the
Name of New Registered Agent: N/A		•
New Registered Office Address: N/A		
	Enter Florida street address	
	, Floric	1a

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MARIA D ARBOLEDA G		• Add
			□ Remove
			Remove
			☐ Change
			Add
			Remove
			☐ Change
			Remove
			□ Change
			□ Add
			Remove
			Change
		- <u></u> -	Add
			☐ Remove
			☐ Change

. ;	N/A	
	•	
		SIA10 3S
		CRL
	<u></u>	
	3	겠요! 호,
	AH 10: 25	14.75 14.75
	<u></u>	<del>,</del>
	09/26/2018	
E. Effect	ctive date, if other than the date of filing: (optional) effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605	.0207 (3)(Б)
<u>Note</u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.	ed as the
If the ro	ecord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlies $90$ th day after the record is filed.	er of:
•*	, SEP/26 2018	
Date	d	
	Signature of a member or authorized representative of a member	
	LUZ BIBIANA HEREDIA	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00