L15000105387

(Requ	restor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/S	State/Zip/Phone	: #)
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O SIMMONS NOV 1 9 2020

COVER LETTER

TO: Registration Se Division of Cor			
subject: <u>{10</u>	voltail investm	ents LLC	
	Name of Limit	led Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ondence concerning this matter to	o the following:	
	Andrea	Name of Person	
		Firm Company	
	3000	NW 79 Ave	
	Dorael	City State and Zip Code	2
			ican wings net
For further information c	oncerning this matter, please ca	И:	
<u>Andrea</u>	Morales	at (<u>760) 22</u> Area Code Daytim	7 - 2094 e Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Se	ction
Division of C	Corporations	Division of Cor The Centre of T	porations

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF COLUMN 5: 12

Hardrail Investments LLC

(Name of the Limited Liability Compan (A Florida Limited Li		S on our records.)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 1500 0 1053-87</u> 7	were filed on	9/24/2014	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company he	<u>:re</u> :	
The new name must be distinguishable and contain the words. I imited I intilia	ty Company," the di	esignation "LEC" or the ab	breviation 114 ("
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		• 1	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our ro	ecords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	uda street address	
		, Florida	
V ·	Сиу	Florida	Zsp Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of rovided for in C	my duties, and I am f hapter 605, F.S. Or,	amiliar with and if this document is

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

1.30 15 73 5:12

<u>Title</u>	Name	Address	Type of Action
President	Andrea Morales	1475 SW 27 ave	□Add
		Miami, FL33145	= Remove
MGR	Andrea Morales	3000 NW 79 AUR	STANDO
		Doral, FL 3312	<u> □</u> Remove
		~	DRemove
			□Change
			TAdd
			□Remove
			□Change
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<u>Note:</u> 11 th:	date is listed date insert	the date med in this	ust be specific at block does not	nd cannot be prior t	o date of filing or ble statutory fil	more than 90 da	(optional) lys after filing) Pursui nts, this date will no	ant to 605 0207 (of be listed as th
f the record spe ecord is filed.	rcifies a dela	yed effect	ive date, but m	un efficiive tii	nc, at 12:07:50	7 1, on the earlie	r of: (b) The 90th	day after the
Dated	OLT	10		member of autho	rized representati	ve of a member		
		Av		Mora				