L15000109382

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C. GOLDEN 527 2 0 2020

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT:	.EX INVESTMENT LLC Name of Limit	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
	ondence concerning this matter		
	3	C	
	NICHOLAS A. GARCIA		
		Name of Person	
	TAVOALEX INVESTME	NT LLC	
		Firm/Company	
	9900 SW 107TH AVE SU	ITE 103	
		Address	
	MIAMI, FLORIDA 33176		
	NICK@VINYAWINE.COM	City/State and Zip Code	
	-	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
NICHOLAS A. GARCI	A	786 877-9586 at ()	
Name o	of Person	Area Code Daytime	: 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

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2377,71 31 7111:29

TAVOALEX INVESTMENT 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 Florida document number L15000109382	Liability Company wei	re med on	and assigned
forida document number	·····		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability (Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	<u></u>	
Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		
	_	 	
			_
Enter new mailing address, if applicable:		900 SW 107TH AVE SUITE 10	3
(Mailing address MAY BE A POST OFFICE BOX)		41AMI, FL 33176	<u> </u>
B. If amending the registered agent and/or agent and/or the new registered office addr		ress on our records, <u>enter th</u>	e name of the new register
Name of New Registered Agent:	NICHOLAS A. GA	RCIA	
New Registered Office Address:	9900 SW 107TH A	VE SUITE 103	
New Registered Office Address.		Enter Florida street address	
			22176
	MIAMI	, Flori	da ³³¹⁷⁰

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.

H 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>	<u>Address</u>	Type of Action
MGR	EDUARDO G TARAJANO SR	600 GRAPETREE DR., APT. CN11	□Add
		KEY BISCAYNE, FL 33149	■Remove
			□Change
MGR	VINYA MERCHANTS, LLC	9900 SW 107TH AVE SUITE 103	≅ Add
		MIAMI, FL 33176	□Remove
			☐ Change
			
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note:	tive date, if other than the date of filing:
If the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	1
	Signature of a member or authorized representative of a member
	NICHOLAS A. GARCIA

Typed or printed name of signee