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COVER LETTER

TO: Registration Sec Division of Corp		• • • • • • • • • • • • • • • • • • • •	•
SUBJECT: 415 I	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
	Humberto Gas	LCiga Name of Person	
	415 Investment	Grose. U.C. Firm/Company	
	1440 Stillwoter	Dr. se Address	· · · · · · · · · · · · · · · · · · ·
	mioni beach F	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	hgarciga @ (E-hail address: (1	o be used for future annual report notifi	ication)
For further information co	ncerning this matter, please ca	alt:	
Name of	Person	at (355) 525-48 Area Code Daytime	Z& Telephone Number
Enclosed is a check for the	e 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

415 Investment	Gross Crc			
(Name of the Limit	(A Florida Limited L	ny as it now appears on our records.) iability Company)		
The Articles of Organization for this Limited L Florida document number <u>L15000153</u> . This amendment is submitted to amend the follow. A. If amending name, enter the new name of the new nam	den .		and assigned	
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the designation "LI.C" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		1440 Stillwater	Drive	
(Principal office address MUST BE A STREET ADDRESS)		MIAMI BEOUN, FI	33141	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1440 Stillwoter Drive mioni Beach fr 33141		
B. If amending the registered agent and registered agent and/or the new registered or			er the name of the new	
Name of New Registered Agent:	Homber	to Courciga	38.5 30 30 30 30 30	
New Registered Office Address:	1440 Stil	Enter Florida street address	61.531 1.531	
	WIOW! BY	City Florida	33 \scription	

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.

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 Title Name <u>Address</u> Type of Action Humberto Coarciga 1440 Stillwoter Prive MGR M Add might Beach F1 33141 ☐ Change 10830 Indian Creek Or # 9 11 Add Dalia Velando MGR Migmi Bosch F1 33141 💢 Remove ☐ Change ☐ Add ☐ Remove □ Change □ Add ☐ Remove ☐ Change ☐ Add □ Remove _□ Change □ Add ☐ Remove _ Change

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Filing Fee: \$25.00