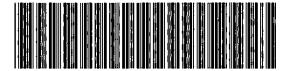
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COVER LETTER

	Registration Sec Division of Corp			
	BASCO IN	VESTMENTS LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspon	ndence concerning this matter	to the following:	
•		JOSE F. BASCOPE		
		Name of Limited Liability Company Amendment and fee(s) are submitted for filing. dence concerning this matter to the following: JOSE F. BASCOPE Name of Person BASCO INVESTMENTS LLC Firm/Company 1750 NE 191 ST Address MIAMI BEACH FL 33179 City/State and Zip Code CHICOPET@HOTMAIL.COM E-mail address: (to be used for future annual report notification) necerning this matter, please call: 239 At (Area Code Daytime Telephone Number		
		BASCO INVESTMENTS	LLC	
			Firm/Company	
		SSTMENTS LLC Name of Limited Liability Company mendment and fee(s) are submitted for filing. ence concerning this matter to the following: JOSE F. BASCOPE Name of Person BASCO INVESTMENTS LLC Firm/Company 1750 NE 191 ST Address MIAMI BEACH FL 33179 City/State and Zip Code CHICOPE7@HOTMAIL.COM E-mail address: (to be used for future annual report notification) cerning this matter, please call: at (
			Address	
		MIAMI BEACH FL 3317	79	
			-	
		E-mail address: (to be used for future annual report notific	cation)
For furth	er information co	oncerning this matter, please c	all:	
JOSE F.	BASCOPE		— - -	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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**

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

Page 1 of 3

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
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		MIAMI BEACH FL 33179	■ Remove
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