416000051691

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(Address)
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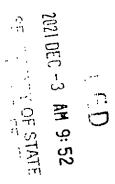
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A. RIVERS DEC 1 6 2021



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COVER LETTER

Registration Section

TO:

Division of Cor	porations .	go - Mana	
	LOWER INVESTMENTS LL	c ·	
SUBJECT:	Name of Lim	ited Liability Company	<u></u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
·	-	·	
	NANCY CHRISTINE MA	TYOSAS	
		Name of Person	
		Firm/Company	
	3301 NE 5TH AVE APT 7	705	
		Address	
	MIAMI, FL 33137		
		City/State and Zip Code	
	MIASUNEI OWERINVES	TMENTSLLC@GMAIL.COM	
		to be used for future annual report n	otification)
For further information c	oncerning this matter, please c	all:	
NANCY MATYOSAS		305 505-0582	
Name o	f Person		time Telephone Number
Enclosed is a check for th	ne following amount:		
区 \$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:		Street Address:	
Registration S		Registration :	
Division of C		Division of C	•
P.O. Box 632		The Centre o	
Tallahassee, l	rl 34314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIA SUNFLOWER INVESTMENTS LLC

(Name of the Lim	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited I Florida document number L16000051691	Liability Company were filed on 03/14/2016	and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our records, enter the na	me of the new register
Name of New Registered Agent:	NANCY CHRISTINE MATYOSAS	2021 D
New Registered Office Address:	Enter Florida street address	. (j
	, Florida	
New Registered Agent's Signature, if changing	City Registered Agent:	Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DANIEL FABIO SANCHEZ	3301 NE 5TH AVE	
		UNIT 321	■Remove
		MIAMI, FL 33137	□ Change
MGR	NANCY CHRISTINE MATYOSAS	3301 NE 5TH AVE	□ Add
		APT 705	= Remove
		MIAMI, FL 33137	□ Change
			□Add
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fan effecti Note: If	e date, if other than the dive date is listed, the date must be the date inserted in this blockt's effective date on the Dep	e specific and k does not m	cannot be prior neet the applic	able statutory i	or more than 90 Thing requiren	(optional) days after filing nents, this date	.) Pursuant to 605.0)207 1 as
record s d is filed	specifies a delayed effective of	late, but not	an effective ti	me, at 12:01 a	m. on the ear	itrof:(b) T	ne 90th day after	the
oated	OVEMBER 18	<u> </u>	2021					
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	S	gnature of a	nember or author	orized represent	uive of a mem	ег		