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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: SO MI VE			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ALEXANDER HACHE J	R.	
		Name of Person	
	HACHE FINANCIAL SO	LUTIONS LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	2645 EXECUTIVE PARK	DRIVE, SUITE 118	
		Address	
	WESTON, FL 33331		
		City/State and Zip Code	
	ALEX@HACHEFINANCI		
		to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please co	all:	
ALEXANDER HACHE	JR	954 701-0824	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

SO MI VE SIX. L.L.C.			
(Name of the Limited Liability Compar (A Florida Limited L	ay as it now appears on our record liability Company)	<u>(s.)</u>	
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000077942</u>	were filed on <u>04/21/2016</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liability and Contain the Words" and Contain the words "Limited Liability and Contain the Words" and Contain the Words and Contain th	ity Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		T L	
		7 JUL 28 PH 1: 05	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		PH I: Q5	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		s, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street addres.	is	
	, Florida		
	City	Zip 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 accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office.	performance of my duties, an provided for in Chapter 605, .	nd I am familiar with and F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If am. ang 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>	Name	Address	Type of Action
MGR	MEDECA INVESTMENTS CORP	78 SW 7TH STREET	
		MIAMI, FL 33131	□ Remove
		 	Change
			TILED Remove PH 1: 05 Remove PH 1: 05 Remove
			PR 1: 05
			□ Ramove
			
			□ Remove
			Change
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				·	TJUL 28 PH 1: 05 DIFFISION OF CONCEPTIONS
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					PR PR Date: C
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Note: If the date is		eine and cannot be prior is not meet the applica	to date of filing or more th)) Pursuant to 605.0207 (3)(b) will not be listed as the
	ies a delayed effec after the record is		t an effective time,	at 12:01 a.m.	on the earlier of:
JULY 24 Dated		2017			
	<i>Cugruglova</i>	elly fo	7 2 1802 111 rized representative of a r	estment.	Ine.
	Signati		of Jimene	nemner	80Z Investme
/ /	UZ MAYING	: (evali	O HIMENA	o Lor li	YOZ INVESTINE

Page 3 of 3