L140000081877

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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COVER LETTER

HABANA SUBJECT: _	INVESTMENT LLC		
SOBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	YULEYDIS BETANCOU	JRT MESA	C 3 (20)
		Name of Person	
	HABANA INVESTMEN		<u> </u>
	Name of Limited Liability Company nelosed Articles of Amendment and fee(s) are submitted for filling. return all correspondence concerning this matter to the following: YULEYDIS BETANCOURT MESA Name of Person HABANA INVESTMENT LLC Firm/Company 7401 W 22 AVE # 206 HIALEAH, FL 33016 City/State and Zip Code E-mail address: (to be used for future annual report notification) other information concerning this matter, please call: EYDIS BETANCOURT MESA Name of Person Name of Person Area Code Daytime Telephone Number		
	HIALEAH, FL 33016	Carteria Corr	
		City/State and Zip Code	
For further information c		·	notification)
YULEYDIS BETANCO	OURT MESA	786 603-000	19
		at ()	
			y
Enclosed is a check for th	ne following amount:		·
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
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		of the crop of the	
Registr Divisio P.O. Bo	ation Section n of Corporations Dx 6327 Ssec. FL 32314	Registration S Division of Co Clifton Buildin 2661 Executiv	ection orporations ng e Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HABANA INVESTMENT LLC				5 5	
(Name of the Limit	ed Liability Compa (A Florida Limited I	iny as it now appears on Liability Company)	our records,)	SION OCT	7
The Articles of Organization for this Limited Li Florida document number £16000081877	ability Company	were filed on 04/26/2	2016	16 OCT I THE PH 4: 13	
This amendment is submitted to amend the following	owing:			*: 13	
A. If amending name, enter the new name of	the limited liab	ility company here:		₹	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the design	ation "LLC" or the abbre	viation "L.L.C."	_
Enter new principal offices address, if applications	able:	6156 SW 158 PASS			
(Principal office address MUST BE A STREE		MIAMI FL 33193			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	6156 SW 158 PASS MIAMI FL 33193			_
B. If amending the registered agent and/ registered agent and/or the new registered of			r records, <u>enter th</u>	e name of the	new
Name of New Registered Agent:	DENNY ECHEVARRIA VALDES				
New Registered Office Address:	6156 SW 158 I	PASS			
registered Office reduces.		Enter Florida s	treet address		
	MIAMI		, Florida _ ³³¹⁹³	3	
		City	,	Zip Code	

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	YULEYDIS BETANCOURT MES	7401 W 22 AVE # 206	Add
		HIALEAH, FL 33016	. ■ Remove
			☐ Change
MGR	DENNY ECHEVARRIA VALDES	6156 SW 158TH PASS	B Add
		MIAMI FL 33193	□ Remove
			Change
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ective date, if other than t	he date of filing: nust be specific and cannot be prior t	a date of filing or more than	(optional)	uant to 605 020
e: If the date inserted in this	block does not meet the application. Department of State's records.	ble statutory filing requi	rements, this date will r	not be listed as
	red effective date, but not	an effective time,	at 12:01 a.m. on t	he earlier o
he 90th day after the r	scord is filled.			
10/05 ed	2016			
				
		<i>//</i>		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00