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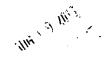
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COVER LETTER

TO: Registration Se Division of Co				
	NTURES, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
•				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Ricardo Gomez			
	RIGO VENTURES, LLC			
		Firm/Company		
	247 SW 8TH ST. #364			
•		Address		
	MIAMI, FL 33130			
		City/State and Zip Code		
	ricardo@gomez.net.co			
	E-mail address: (to be used for future annual report notific	r ; - ; - ; - ; - ; - ; - ; - ; - ; -	and in
For further information of	concerning this matter, please co	all:	AHA AHA AHA	742344
Claribeth Valencia		305 3433040 at ()	885 - 8	m
Name of Enclosed is a check for t	of Person		Telephone Number 7	D
	_	Figsena pitta in ing	· · · · · · · · · · · · · · · · · · ·	٠
\$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

RIGO VENTURES, LLC	•	
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our remitted Liability Company)	ecords,)
The Articles of Organization for this Limited Liability Com	npany were filed on 06/20/2016	and assigned
Florida document number L16000118118		,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	202
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		(C) (C) (S)
Enter new mailing address, if applicable:		m _o
(Mailing uddress MAY BE A POST OFFICE BOX)	w	
	was for his course or come of the Americans in the	<u> </u>
		To and
B. If amending the registered agent and/or register registered agent and/or the new registered office address		ords, enter the name of the new
Topisered again unique for the registered office address	S Here.	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		, Florida
	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>	Name	Address	Type of Action
MGR	RICARDO GOMEZ	247 SW 8th St. #364 MIAMI FL 35	Add
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		-	☐ Change
- SWAMANA			Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
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Effective date, if	other than the	date of filing:	07/01/2016	ate of filing or mo	(opt	ional) er filing.) Pursuant to e	605 0207 <i>(</i>
	inserted in this blo	ock does not mee	t the applicable	statutory filing	requirements, th	is date will not be I	isted as t
Note: If the date							
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Filing Fee: \$25.00