

APR/12/2018/THU 12:39 PM

L16000197093

FAX No.

P.001/004

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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INVESTMENTS D&G, LLC

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

STATE
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J. LEGGETT
APR 13 2018

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Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INVESTMENTS D&G, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/25/2016 and assigned
Florida document number L16000197093.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, 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

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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>	<u>Type of Action</u>
AMBR	Gleiny C. Espinoza Colmenares	5851 NW 117TH STREET	<input type="checkbox"/> Add
		HIALEAH, FL 33015	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Douglas E. Briceno Carrillo	5851 NW 177TH STREET	<input type="checkbox"/> Add
		HIALEAH, FL 33015	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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2018 APR 12 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 APR 12 AM 10:2
SECONDARY OF STATE
TALLAHASSEE, FLORIDA

7
100
100
100
100

(b) The 90th day after the record is filed.

Dated 04/12 2018

① *[Signature]*
Signature

Signature of a member or authorized representative of a member

Douglas Enrique Briceño Carrillo
Typed or printed name of signer

Typed or printed name of signer