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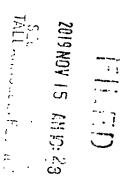
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COVER LETTER

то:	Registration Se Division of Cor						
	MVEGA INVEST LLC						
SUBJE	.C1:	Name of Lim	ited Liability Company				
The en	closed Articles of	Amendment and fee(s) are sub	emitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
		BENJAMIN BERTHET					
		2BC FLORIDA LLC	Name of Person				
		Firm/Company 323 SUNNY ISLES BLVD SUITE 713					
		Address SUNNY ILSES BEACH, FL. 33160					
		b.berthet@2bc.us	City/State and Zip Code				
		E-mail address: (to be used for future annual report notif	lication)			
For fur	ther information co	oncerning this matter, please ca	all:				
BENJA	AMIN BERTHET		941 7269984 at ()				
	Name of	f Person	Area Code Daytime	e Telephone Number			
Enclose	ed is a check for th	ne following amount:					
\$25	i.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

MVEGA INVESTILLO

(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Included In	Liability Company were filed on <u>I</u>	1/01/2016 and assigned
his amendment is submitted to amend the fol	lowing:	
A. If amending name, <u>enter the new name</u>	of the limited liability company b	nere:
he new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "L.L.C" or the abbreviation "L.L.C."
inter 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>	7 2019
		2019 NOV
3. If amending the registered agent and egistered agent and/or the new registered of		
Name of New Registered Agent:	NDC FLORIDA LLC	<u> </u>
New Registered Office Address:	350 LINCOLN ROAD SUITE 3	CO
	Enter Flo	orida street address
	MIAMI BEACH	, Florida 33139
	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

Page I of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MICHEL GALAUP	8 AVENUE DE LA RESISTANCE, CANITROT	
		81640 MONESTIES, FRANCE	
		- · · ·	■ Remove
			Change
AMBR	MICHEL GALAUP	8 AVENUE DE LA RESISTANCE	■ Add
		91640 MONESTIES, FRANCE	
			☐ Remove
			Change
			Add
			Remove
			□ Change
			Add
		.	☐ Remove
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			□ Remove
			Change
			☐ Remove
			Change

	
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Effect	ive date, if other than the date of filing: (optional)
	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docun	nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
The	90th day after the record is filed.
	NOVEMBER 03
Dated	NOVEMBER 07 2019

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00