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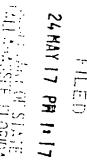
(Rec	questor's Name)	
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer.	

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COVER LETTER

TO: Registration Section
Division of Corporations

n - 1 	VESTMENTS, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	•	
	Ali A Saleh		
		Name of Person	
	LAILA INVESTMENTS.	I.LC	
		Firm/Company	
	3664 PALM AVENUE		
		Address	
	HIALEAH, FL 33012		
		City/State and Zip Code	
	lailainvestmentslle1@gmail		
	E-mail address: (to be used for future annual report n	otification)
For further information c	oncerning this matter, please ca	all:	
Ali A Saleh		305 525-0424 at ()	
Name o	f Person	Area Code Dayt	ime 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 Addres		Street Address: Registration S	Section
Registration Section Division of Corporations		Negistration a	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAILA INVESTMENTS, LLC		
(Name of the Limited Liability Company a (A Florida Limited Liab	as it now appears on our rec ility Company)	cords.)
The Articles of Organization for this Limited Liability Company we	re filed on01/09/2017	and assigned
Florida document number L17000007078		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	
N/A		
he new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- 2
Principal office address MUST BE A STREET ADDRESS)		
		22 - In
Enter new mailing address, if applicable:		79 R O
Mailing address MAY BE A POST OFFICE BOX)		
		D _{rt1} 0
_		
3. If amending the registered agent and/or registered office add	ress on our records, <u>en</u>	ter the name of the new regi
gent and/or the new registered office address here:		
Name of New Registered Agent:	 	
New Registered Office Address:		
	Enter Florida street ad	dress
		771

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.

City

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>	Address	Type of Action
AMBR	Yadiel Perez	1000 Brickell Ave. Suite 715 Miami, Fl 33131	= Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
		□Remove	
		□Change	
			□ Add
		□Remove	
		□Change	
			□Add
		□Remove	
		□Change	
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please add Yadiel Perez as AMBR of Laila Investments LLC Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated ____May 09 Signature of a member or authorized representative of a member Ali A Saleh Typed or printed name of signee