## 117000037663

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## **COVER LETTER**

	stration Sec sion of Corp				
SUBJECT:	SCR INVES	TMENTS GROUP LLC			
SOBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		HERNAN K. SUAREZ CA	AICEDO		
			Name of Person		
		SCR INVESTMENTS GR	OUP LLC	r filing. lowing:  me of Person  mr-Company  AIL, SUITE 8  Address  Ite and Zip Code  NVESTMENTSGROUP.COM  for future annual report notification)	
	Name of Limited Liability Company  Articles of Amendment and fee(s) are submitted for filing.  Il correspondence concerning this matter to the following:  HERNAN K. SUAREZ CAICEDO  Name of Person  SCR INVESTMENTS GROUP LLC  Firm-Company  11681 S. ORANGE BLOSSOM TRAIL, SUITE 8  Address  ORLANDO, FL 32837  City/State and Zip Code  HERNANKALEV.SUAREZ@SCRINVESTMENTSGROUP.COM  E-mail address: (to be used for future annual report notification)  Dermation concerning this matter, please call:  SUAREZ CAICEDO  321 333-9424 at (				
		HERNAN K. SUAREZ CAICEDO  Name of Person  SCR INVESTMENTS GROUP LLC  Firm: Company  11681 S. ORANGE BLOSSOM TRAIL, SUITE 8  Address  ORLANDO, FL 32837  City/State and Zip Code  HERNANKALEV.SUAREZ@SCRINVESTMENTSGROUP.COM  E-mail address: (to be used for future annual report notification)			
	HERNAN K. SUAREZ CAICEDO  Name of Person  SCR INVESTMENTS GROUP LLC  Firm-Company  11681 S. ORANGE BLOSSOM TRAIL, SUITE 8  Address  ORLANDO, FL 32837  City/State and Zip Code  HERNANKALEV.SUAREZ@SCRINVESTMENTSGROUP.COM  E-mail address: (to be used for future annual report notification)  Information concerning this matter, please call:				
		ORLANDO, FL 32837			
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<b></b>				cation)	
For further in	formation co	ncerning this matter, please co	all:		
HERNAN K.	SUAREZ C	AICEDO			
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a	check for the	: following amount:			
■ \$25.00 Fi	ling Fce	□ \$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

SCR INVESTMENTS GROUP LLC				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number £17000037663	were filed on 02/16/2017		and as	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	the abbrev	iation "I	L.C."
Enter new principal offices address, if applicable:	11681 S. ORANGE BLOSSOM TR	RAIL		
Principal office address MUST BE A STREET ADDRESS)	SUITE 8	-	5-3	
	ORLANDO, FL 32837		=::	***
Enter new mailing address, if applicable:	111681 S. ORANGE BLOSSOM T	RAIL ~	DCT 30	g;=1
Mailing address MAY BE A POST OFFICE BOX)	SUITE 8	٠,	<u>,,,,</u>	;
	ORLANDO, FL 32837			
		• •	<u></u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		iter the	name	of the n
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			<u></u>
	Florid.			
	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

Title	Name	Address	Type of Action
MGR	Goretty Caicedo de Suarez	11681 S. Orange Blossom Trail ±8	■ Add
		Orlando, FL 32837	☐ Remove
			□ Change
MGR	Jairo Hernan Suarez Sierra	11681 S. Orange Blossom Trail # 8	■ Add
		Orlando, FL 32837	■ Remove
			☐ Change
MGR	Hernan K. Suarez Caicedo	10301 US Hwy 27 Unit 164	□ Add
		Clermont, FL 34711	■ Remove
			Change
MGR	Mayerly V. Ramirez Vargas	10301 US Hwy 27 Unit 164	🗆 Add
		Clermont, FL 34711	■ Remove
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	// Iernan K. Suarez		1/				••	新	

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Filing Fee: \$25.00