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## **COVER LETTER**

	gistration Sec vision of Corp			
A. (1) 111 CM		ERICAN INVESTMENTS, LL	C.	
SUBJECT:		Name of Limit	ed Liability Company	<del></del>
The enclose	d Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please retur	n all correspor	ndence concerning this matter t	o the following:	
		Crislayne Abraham		
			Name of Person	
		A & A American Investme	nts, LLC.	
	Firm/Company			
		3408 W. 84th Street, Suite	203	
	Address			
		Hialeah ,Florida 33018		
			City/State and Zip Code	<del></del> _
		americanhomeprov@bellson		
		E-mail address: (t	o be used for future annual report notifi	ication)
For further	information co	oncerning this matter, please ca	dl:	
Crislayne Abraham		305 820-3001 at ()		
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	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 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

A & A AMERICAN INVESTMEN				
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on o Liability Company)	ur records.)	
The Articles of Organization for this Limited L Florida document number <u>L17000058999</u>	iability Company	were filed on 03/14/20	and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	of the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic	rable:	3408 W 84th Street		
(Principal office address MUST BE A STREI		Suite 203		
		Hialeah, Florida 33018		
Enter new mailing address, if applicable:		3408 W 84th Street		
Mailing address MAY BE A POST OFFICE	BOX)	Suite 203		
		Hialeah, Florida 330	18	
B. If amending the registered agent and registered agent and/or the new registered o	_		records, enter the name of the ne	
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:	3408 W 84th S	treet, Suite 203	64	
		Enter Florida str	eet address	
	Hialeah		, Florida <u>33018</u>	
		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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ruben Alonso Santana	3408 W 84th Street	Add
		Suite 203	Remove
		Hialeah, Florida 33018	■ Change
MGR	Cristayne Abraham	3408 W 84th Street	Add
		Suite 203	□ Remove
		Hialeah, Florida 33018	☐ Change
		<u> </u>	Add
			Remove
			☐ Change
			PRemove
			□ Change
	<del></del>		
			Remove
			Change
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			☐ Remove
			Change

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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00