111000061951

| <u> </u> |
|---|
| (Requestor's Name) |
| |
| (Address) |
| |
| (Address) |
| · |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |



800297362068

04/03/17--01030--007 **25.00

17 APR -3 EM E. 28

Office Use Only

APR 0 4 2017

Y SULKER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| WASHINGT | ON INVESTME | NT LLC | | | | | |
|---|---|--|--------------------------|--------------------------|-------|--|--|
| (Name of the Lim | ited Liability Com (A Florida Limite | pany as it now appea d Liability Company) | ars on our records. | | | | |
| The Articles of Organization for this Limited I Florida document numberL17000061951 | Liability Compar | ny were filed on _ | 03/22/2017 | and assigned | | | |
| This amendment is submitted to amend the fol | lowing: | | | | | | |
| A. If amending name, enter the new name | of the limited lia | bility company h | <u>iere</u> : | | | | |
| (SAME) | | | | | | | |
| The new name must be distinguishable and contain the | words "Limited Lia | bility Company, 'the | designation "LLC" er t | he abbreviation "L.L.C." | | | |
| Enter new principal offices address, if appli | (SAME) | | | | | | |
| (Principal office address MUST BE A STRE | · · · · · · · · · · · · · · · · · · · | | | | | | |
| * | | ** | ., | | _ | | |
| | | | | 211 | | | |
| Enter new mailing address, if applicable: | | (SAME) | | 3K1 3 | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | | | | |
| | | | • | 33: | a . | | |
| | | | | 177 m | | | |
| B. If amending the registered agent and | l/or registered | office address o | n our records, <u>er</u> | iter the name of the | e nev | | |
| registered agent and/or the new registered o | office address he | e <u>re</u> : | · - | | | | |
| | | | | | | | |
| Name of New Registered Agent: | (SAME) | | | | _ | | |
| New Registered Office Address: | (SAME) | | | | | | |
| - | | Enter Flo | orida street address | | | | |
| | | | , Florida | a | | | |
| | • • | 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> | Address | Type of Action |
|--------------|------------------------|------------------------|----------------|
| AMBR | GIRALDO A. PEREZ PEREZ | 1255 W 49 PL APT. B202 | ■ Add |
| | | HIALEAH FL 33012 | □ Remove |
| | | | □ Change |
| AMBR | MARIO F. FUNDORA | 1275 W 35 ST APT. 29B | ⊟ Add |
| | | HIALEAH FL 33012 | ☐ Remove |
| | | | Change |
| | | | □ Add |
| • | | | □ Remove |
| | | | Change |
| | | | 178 APR |
| | | | □ Remove |
| | | | □ Remove |
| | | | Change |
| | | | Add |
| | | | Remove |
| | | | Change |

| | ED IN EGUAL SHA | RES | | | | | | |
|-------------------|--|---------------------------------------|-------------------------------------|---|----------------|---|--|---------------------|
| MARI | O E. FUNDORA- RE | GISTER AGE | NT & AMBR | SS#XXX-XX-1 | 594 IN THE B | USINESS | FOR 33 | .3% |
| GIRA | LDO A. PEREZ PERI | EZ-AMBR SS# | XXX-XX-688 | 6 IN THE BUS | SINESS FOR 3 | 3.3% | | |
| MARI | O F. FUNDORA-AM | BR SS#XXX- | XX-4295 IN T | HE BUSINESS | FOR 33.3% | | | |
| | | | | | | | | |
| | | | | | | · | | |
| | | | | | | | | |
| | | | | | | | | |
| | | · , • • | | <u>, , , , , , , , , , , , , , , , , , , </u> | | | 70- | |
| | | | | | | | III, | 17 AP |
| | | | | | | | | که |
| | | | | | | | - <u>- </u> | |
| ffective of the | te, if other than the date is listed, the date mu- date inserted in this bl effective date on the D | st be specific and lock does not m | cannot be prior neet the applica | to date of filing o able statutory fi | ling requireme | (optiona ays after filin nts, this da | ng.) Pursu | ant to 60 ot be lis |
| ecord s e 90th | specifies a delayed day after the rec | d effective d cord is filed. | late, but no | t an effectiv | e time, at 12 | 2:01 a.m | on th | e earl |
| | | | 0017 | | | | | |
| i | MARCH 29TH | , | 2017 | <u> </u> | | | | |

Page 3 of 3

Filing Fee: \$25.00