117000065367

(Requestor's Name)
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(Business Entity Name)
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DIVISION OF CONTINUATIONS

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COVER LETTER

	Registration Se Division of Cor					
		NVESTMENTS, LLC				
SUBJEC	г:	Name of Lim	ited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please rett	ım all correspo	indence concerning this matter	to the following:			
		Adelina Ruiz Baez, Esq.				
		·-···	Name of Person			
		Law Offices of Adelina Re	uiz, PA			
			Firm/Company			
		800 Village Square Crossing				
		Palm Beach Gardens, FL 33410				
		City/State and Zip Code				
		adclinaruiz@aruizlaw.com				
For furthe	r information c	email address: (to be used for future annual report notifi all:	cation)		
Adelina R		-	561 402 7060 at ()			
	Name o	f Person		Telephone Number		
Enclosed i	s 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:

TO:

Registration Section

Division of Comorations

STREET/COURIER ADDRESS:

Registration Section Division of Cornorations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FINECA INVESTMENTS, LLC	
(Name of the Limite	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia	ability Company were filed on 03/22/2017 and assigned
his amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of	the limited liability company here:
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abtraeviation "L.L.C."
Enter new principal offices address, if applica	tble:
Principal office address MUST BE A STREET	T ADDRESS)
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B	<u>30X)</u>
B. If amending the registered agent and/o registered agent and/or the new registered off	or registered office address on our records, enter the name of the lice address here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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>	Name	Address	Type of Action
MGR	Inversiones Sovassica, SAS	Calle 4 Sur 43 AA 30 Int. 405	
		Medellin, Colombia, AN 05002 CC	■ Remove
			Change
MGR	Jessica Tobon	6685 Forest Hill Blvd., Ste. 211	
		Greenacres, FL 33413	□ Remove
			Change
		 	
			Remove
			Change
			
			Remove
			☐ Change
			O Add
			□ Remove
			Change
			Remove
			Change

	
Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 20th day after the record is filed.
Dated	August 4 , 2017 .
	Signature of a member or authorized representative of a member
	Jessica Tobon
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00