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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CHOBOFICIO VENTUROS LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brian George Name of Person
CALAS GROCP Firm/Company
2000 Penco de rean Blud. Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paula Sanchez at (305) 415 5222. Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Signature Solution Status Solution Status Solution Soluti

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

2017 JUL -5 PH 4: 04

ALL MARKET STATE
STA

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on	Glubufian Vo	Liability Comp	pany as it now app	oears on our recor	(A) () () () (ds.)	MARY DE STATE	,
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable:	Articles of Organization for this Limited Liab	oility Compan		,	2017	and assigned	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable:	amendment is submitted to amend the follow	ring:					
Enter new principal offices address, if applicable:	f amending name, enter the new name of the	he limited lia	bility company	here:			
	er new principal offices address, if applicab	ole:	oility Company." th	ne designation "LLo	C" or the ab	obreviation "L.L.C."	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u>2X)</u>					-
B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here:				on our record	ls, <u>enter</u>	the name of the r	<u>1ew</u>
Name of New Registered Agent: (UCS CAC)	Name of New Registered Agent:	<u>Cala</u>	5 Gar	1/2			-
New Registered Office Address: 200 Parts de France Bloth. Enter Florida street address	New Registered Office Address:	200		Jo Fey	7 B	ral.	
Couch Grittes, Florida 33134	,	Cucil C				33134	-

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

Page 1 of 3

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 = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
MINITSE	Amazinia Curxiting Group, LLC	299 Alhambia Circle	X Add
	aroop, LLC	Dute 510	🗆 Remove
		Coul Gables, FL 33134	├ ├ ├ Change
<u>MM9, L</u>	Amazonia Group LIC	299 Albambia Circle,	🗆 Add
		Suite 510	Remove
		Coral Gaves, FL 3313	Change
			Remove
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Effecti	ve date, if other than the date of filing: (optional)
f an eff	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
	·
ne rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The	90th day after the record is filed.
ine	
ine	
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00