L17000097493

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2020 NOV 17 AM 10: 16 SECTION OF SECTION OF

LAA. 12/21/20

COVER LETTER

ean nece.	SCO Inves	tments LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Jaime Parlade	
		Name of Person	
		Parlade Schaefer & Schortz	
		Firm/Company	
	59	75 Sunset Drive Suite 802	
		Address	
		Miami, Fl 33143	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	fication)
For further information c	oncerning this matter, please c	all:	
Jaime	Parlade	at (305) 670-0400	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	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 Addres	<u>s:</u>	Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCO Investmen	its LLC			
(Name of the Limited Liability Company (A Florida Limited Lia	<u>(as it now appea</u> ibility Company)	irs on our records.)		_
The Articles of Organization for this Limited Liability Company w	ere filed on _	10/02/2020	and	l assigned
lorida document number <u>L17000097493</u> .				
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	tv company h	ere:		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the	designation "LLC" or	the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)			<u> </u>	3
			VIIVO 176	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Inter new mailing address, if applicable:				J (
Mailing address MAY BE A POST OFFICE BOX)				: !!! :
				· · · · · · · · · · · · · · · · · · ·
			6	1
3. If amending the registered agent and/or registered office adigent and/or the new registered office address here:	ldress on our	records, <u>enter the</u>	name of the	new regist
gent and/or the new registered office address nere.				
Name of New Registered Agent:				
				21.77
New Registered Office Address:	Enter Flo	orida street address		
		, Floric	da	
	City	, , , , , , , , , , , , , , , , ,	ua Zin C	ode

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	Jose Alejandro Scozzari	720 NE 62nd Ave #304 Miami Fl 33138	ŪS Add
			□Remove
			□Change
AMBR Martin Bordalejo	Martin Bordalejo	720 NE 62nd Ave #304 Miami F133138	⊠Add
			□Remove
			□Change
		🗀 Add	
			□ Remove
			□ Add
			□Remove
			□Change
			□ Add
		□Remove	
			□Change
		□Add	
		□Remove	
			□Cbanve

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
_	
(If an effec Note: If	e date, if other than the date of filing:
the record to the cord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the l.
Dated _	November 11th 2020
	em Zifi
	Signature of a member or authorized representative of a member
	Wendy P. Silva Typed or printed name of signee