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K SALY JUN 28 2017

COVER LETTER

TO: Registration Sc Division of Cor			
DZHZ INV SUBJECT:	TESTMENTS LLC		
SCHIECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	TULIO A HERNANDEZ		
		Name of Person	
	DZHZ INVESTMENTS I.	LC	
		Firm Company	
	12838 SW 28 CT		
	<u> </u>	Address	
	MIRAMAR FL 33027		
	ARISTIDESFE@ HOTMAI	City State and Zip Code	
		to be used for future annual report	notification)
For further information c	oncerning this matter, please co	ill:	
ARISTIDES FERNANI	DEZ	305 298-657	9
Name c	t Person	at ()	ytime Telephone Number
Enclosed is a check for t	he 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

2017 JUN 26 PM 4: 23

MILAHAMAN LESIANE

DZHZ INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on $\frac{0502/2017}{}$	and assigned
Florida document number 1.17000097761		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	····	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:		ords, enter the name of the new
New Registered Office Address:	Enter Florida street a	ddrew
	Florida	
	Cny	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as poing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutic rovided for in Chapter 6	s, and I am familiar with and 605, F.S. Or, if this document is
If Chap	vino Registered Agent Signer	ture of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person, being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	WALDO J DIAZ LABOUR	12838 SW 28TH CT	
		MIAMI FI, 33027	☐ Remove
			☐ Change
AMBR	TULIO A HERNANDEZ	12838 SW 28TH CT	
		MIAMI FL 33027	□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			JUN 26 PM L: 23 CANASSEEL STORE
			For Linguist Change
			□ Add
			□ Remove
			Change
		<u> </u>	
			Remove
			Change

				
				
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'ffective date if other than the d	ate of filing:		(opti	onal)
Iffective date, if other than the d fan effective date is listed, the date must b Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the ap	plicable statutory fili	more than 90 days after ng requirements, this	tiling.) Pursuant to 605,0207 (s date will not be listed as t
e record specifies a delayed of The 90th day after the recor		not an effective	time, at 12:01 a	a.m. on the earlier of:
Dated	2017			
		·		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00