

L17 000 101 913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

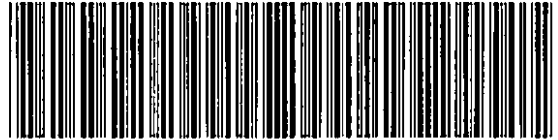
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/11/19-000 3-011 2019.01

19 10/11/19 10:00 AM

JAN 23 2020

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GIUSASI 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:

SAMUEL RACCAH
Name of Person

Firm/Company

1800 PURDY AVE
Address

MIAMI BEACH FL 33139
City/State and Zip Code

ING. RACCAH@GMAIL.COM
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

SAMUEL RACCAH at (786) 2086752
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:
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

SIUSASI 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 05/08/17 and assigned
Florida document number L17000101913

This amendment is submitted to amend the following:

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:

(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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

SAMUEL RACCA H

New Registered Office Address:

435 21ST ST UNIT C04

Enter Florida street address

MIAMI BEACH, FL Florida 33139

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

MGR = Manager
AMBR = Authorized Member


Title	Name	Address	Type of Action
MGR	INVESTOR TWO LLC	435 21ST ST	<input type="checkbox"/> Add
		MIAMI BEACH, FL	<input checked="" type="checkbox"/> Remove
		33139	<input type="checkbox"/> Change
MGR	SAMUEL RACCAH	435 21ST ST	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL	<input type="checkbox"/> Remove
		33139	<input type="checkbox"/> Change
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[illegible]

(If an effective 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 (3)(b)

If the record 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 record is filed.

Dated DECEMBER 16, 2019


Signature of a member or authorized representative of a member

SAMUEL RACCAN
Typed or printed name of signee

Filing Fee: \$25.00