

L17000103720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

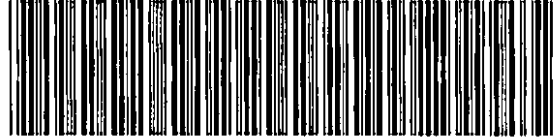
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D BRUCE
AUG 08 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOT INVESTMENT GROUP 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:

LUIS L. MORENO

Name of Person

LOT INVESTMENT GROUP LLC

Firm/Company

4416 RIDGELINE CIRCLE

Address

TAMPA, FLORIDA 33624

City/State and Zip Code

INFO@LOTINVESTMENT.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

LUIS L. MORENO

at (813) 369-3556

Name of Person

Area Code

Daytime Telephone Number

SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

LOT INVESTMENT GROUP 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 MAY 10, 2017 and assigned
Florida document number L17000103720.

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)

4416 RIDGELINE CIRCLE

TAMPA, FLORIDA 33624

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4416 RIDGELINE CIRCLE

TAMPA, FLORIDA 33624

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:

LUIS L. MORENO

New Registered Office Address:

4416 RIDGELINE CIRCLE

Enter Florida street address

TAMPA

Florida 33624

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.

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>	<u>Address</u>	<u>Type of Action</u>
AMGR	ROGELIO GALLO	9068 LAKE CHASE ISLAND WA	<input checked="" type="checkbox"/> Add
		TAMPA, FLORIDA 33626	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
RA	DOROTEO CRUZ		<input type="checkbox"/> Add
		3303 GENTLE DELL COURT	<input checked="" type="checkbox"/> Remove
		WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 1 OF AUGUST

2017

Signature of a member or authorized representative of a member

LUIS L. MORENO

Typed or printed name of signee