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COVER LETTER

	gistration Section of Corp		·		
SUBJECT:	J. Alvarez li	nvesting, LLC			
SOBJECT.		Name of Lim	ited Liability Company		
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Jorge Alvarez			
		<u> </u>	Name of Person		
		J. Alvarez Investing, LLC			
			Firm/Company	·	
		5500 Military Trail Suite 2	2-195	29 FAL	
			Address		-4-
		Jupiter, FL 33458		JE 14 ASSE	
		jorgcalvarez@bellsouth.net	City/State and Zip Code	2017 JUL 14 D 3:	
		E-mail address: (to be used for future annual report notific	cation)	
For further in	nformation co	oncerning this matter, please ca	all:	<i>≫`</i> w	
Jorge Alvaro	ez		954 394-2412		
	Name of	f Person		Telephone Number	
Enclosed is a	a check for th	e following amount:			
■ \$25.00 F	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

J. Alvarez Investing, LLC					
(<u>Name of the Limited Liability C</u> (A Florida Lir	Company as It now appears on our r nited Liability Company)	ecords.)			
The Articles of Organization for this Limited Liability Com Florida document number L17000147474	ipany were filed on 7-10-2017	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	l 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 ADDRES	<u> </u>	77 83			
		2017 25 C. C. S. C. S. C. C. S. C. S. C. C. S. C			
Enter new mailing address, if applicable:		SS - F			
Mailing address MAY BE A POST OFFICE BOX)					
		<u> </u>			
3. If amending the registered agent and/or registere egistered agent and/or the new registered office address		cords, enter the name of the n			
egistered agent and/or the new registered office address	s nere.				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
		Florida			
	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

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
MGR	Jorge Alvarez	5500 Military Trail Suite 22-195	■ Add
		Jupiter, FL 33458	□ Remove
			Change
		<u> </u>	🗆 Add
			Remove
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			SSEE, FL
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									_ _
			07-03-2017						
Effective date, if other fan effective date is listed,		of filing:		o date of filing	or more than 90 c	_ (option lays after fi		rsuant to	605,0207
Note: If the date inserte document's effective da	d in this block o	oes not med	et the applica						
e record specifies The 90th day afte			te, but not	an effecti	ve time, at 1	2:01 a.i	m. on	the ea	ırlier of
Dated			2017						
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00