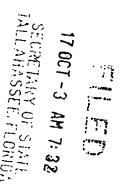
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| (Request | or's Name) |
|--------------------------------|------------------------|
| (Address |) |
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| (City/Stat | e/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Busines | s Entity Name) |
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COVER LETTER

| то: | Registration Se Division of Cor | | | |
|---------------|------------------------------------|--|---|---|
| CHEL | 4 PI INVES | STMENTS, LLC | | |
| SUDJ. | EC1: | Name of Lim | nited Liability Company | |
| The er | nclosed Articles of | Amendment and fee(s) are sub | emitted for filing. | |
| Please | return all correspo | ndence concerning this matter | to the following: | |
| | | Luis Javier Marcano | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 16060 S Post RD Apartme | ent 104 | |
| | | | Address | |
| | | Weston, FL. 33331 | | |
| | | | City/State and Zip Code | |
| | | luism_9144@hotmail.com | | |
| | | E-mail address: (| to be used for future annual report notifi | cation) |
| For fur | rther information c | oncerning this matter, please c | afl: | |
| Luis J | lavier Marcano Gir | on | 954 2350282 at () | |
| | Name o | f Person | Area Code Daytime | Telephone Number |
| Enclos | sed is a check for th | ne following amount: | | |
| □ \$ 2 | 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

| 4 PHINVESTMENTS, LLC | | | |
|---|--|---|---------------------------------|
| (Name of the Lim | ited Liability Compa (A Florida Limited | nny <u>as it now appears on our recor</u> Liability Company) | <u>ds.</u>) |
| The Articles of Organization for this Limited lands document number L17000162927 | Liability Company | were filed on 07/28/2017 | and assigned |
| This amendment is submitted to amend the fol | llowing: | | |
| A. If amending name, enter the new name | of the limited liab | nility company here: | |
| The new name must be distinguishable and contain the | words "Limited Liabi | lity Company," the designation "LLC | C" or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | icable: | 1537 Barcelona Way, Weston | , FL 33327 |
| Principal office address MUST BE A STRE | ET ADDRESS) | | |
| | | | |
| Enter new mailing address, if applicable: | | 1537 Barcelona Way, Weston | . FL 33327 |
| Mailing address MAY BE A POST OFFICE | E BOX) | | |
| 3. If amending the registered agent and registered agent and/or the new registered of | | | s, enter the name of the ne |
| egistered agent ana/or the new registered to | Jinee address nee | <u>.</u> | ASE 1 |
| Name of New Registered Agent: | RIANO & ASS | SOCIATES, LLC | |
| New Registered Office Address: | 1001 Ives Dair | y Rd, suite 206 | ASSI -3 |
| | Miami | | lorida 13179 |
| | | City | P= Zip Code |

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.

New Registered Agent's Signature, if changing Registered Agent:

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> | <u>Address</u> | Type of Action |
|--------------|----------------------|--------------------------|----------------|
| MGR | Yoselin Ching Falcon | 16060 S Post Rd. Apt 104 | |
| | | Weston, FL. 33331 | Remove |
| | | | Change |
| MGR | Luis Javier Marcano | 1537 Barcelona Way | ≅ Add |
| | | Weston, FL 33327 | Remove |
| | | | Change |
| | | | Add |
| | | · | □ Remove |
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Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee