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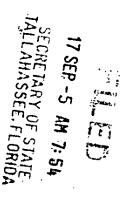
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COVER LETTER

	distriction Section of Corp				
SUBJECT:	ZARAGOZ	A & C INVESTMENT, LLC		•	
Name of Limited Liability Company					
		Amendment and fee(s) are sub			
		CARLOS X. RODRIGUE	z		
			Name of Person		
		HALPERN RODRIGUEZ	, LLP	1.	
			Firm/Company		
		355 ALHAMBRA CIRCL	E, #1101		
		7.71	Address		
		CORAL GABLES, FLORI	IDA 33134		
		**** <u>****</u>	City/State and Zip Code		
		RICARDOZARAGOZARO	DIO@GMAIL.COM to be used for future annual report notifi		
For further in	nformation co	e-mail sources: () oncerning this matter, please ci	-	canon)	
CARLOS X	. RODRIGEZ	z	· 305 442-8883		
	Name of	Person		Telephone Number	
				,	
Enclosed is a	check for the	e following amount:			
■ \$25.00 F	iling Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate 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

ZARAGOZA & C INVESTMENT, LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	v as it new appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Plorida document number L17000175565	were filed on 8/16/17 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	ry 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)	901 Brickell Vey Blud # 503 miami, Pa 33133
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	901 Brickell Veg Blod. # 503 Migoni, FL 33133
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:	
New Registered Office Address:	Enter Florida street address Florida Ctiy Florida Ctiy

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>	Name	Address	Type of Action
MGR	RICARDO ZARAGOZA ROJO	901 BRICKELL KEY BLVD,	D Add
		UNIT 503, MIAMI, FL 33131	Remove
			■ Change
MGR	JOHN CONTRERAS	45 SW 9TH ST, UNIT 1102	
		MIAMI, FL 33130	Remove
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an effective date is listed, the date must be specific and cannot be prior to date lote: If the date inserted in this block does not meet the applicable stocument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an experience of the control of th	stutory filing requi	90 days after fil rements, this d	ate will not	t be liste	
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date lote: If the date inserted in this block does not meet the applicable st locument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective day after the record is flied. Signature of a member grauthorized re-	effective time,	90 days after fill rements, this d	ate will not	t be liste	

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Filing Fee: \$25.00