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## **COVER LETTER**

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TO:

Registration Section

DISCOVE SUBJECT:	RY RG INVESTMENTALIC		
	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
	ondence concerning this matter	~	
	ROGER LOPEZ		
		Name of Person	<del>- •/</del>
	BENTLEY INVESTMEN	T GROUP	
		Firm/Company	<del></del>
	1555 BONAŸENTURE B	LVD SUITE 1019	
	<del></del> ,	Address	
	WESTON, FL 33326		
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	ication)
For further information o	concerning this matter, please ca	all:	
ROGER LOPEZ		954 801-2747	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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)
	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DISCOVERY RG INVESTMEN	,		
(Name of the Lin	nited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Living Inches Inche	Liability Company were filed on	/01/2017 and assigned	
his amendment is submitted to amend the fo	llowing:	T.	
. If amending name, enter the new name	of the limited liability company he	<u>re</u> :	
\$A			
he new name must be distinguishable and contain the	words "Limited Liability Company," the de-	esignation "LLC" or the abbreviation "L.L.C."	
inter new principal offices address, if appl	icable: NA		
Principal office address MUST BE A STRE	ET ADDRESS)		
;			
Inter new mailing address, if applicable:	NA		
Mailing address MAY BE A POST OFFICI			
	<u></u>		
	<del></del>		
3. If amending the registered agent and	d/or registered office address on	our records, enter the name of the	
egistered agent and/or the new registered	office address here:		
Name of New Registered Agent:	MARIA JOSE GERARDI		
	7900 HARBOR ISLAND DRIVE # A-825		
New Registered Office Address:		ida street address	
t .	NORTH BAY VILLAGE	, 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 Title Name <u>Address</u> Type of Action YAHEN MARTINEZ 1555 BONAVENTURE BLVD □ Add **SUITE 1019** Remove WESTON, FL 33141 ☐ Change MARIA ISABEL GONZÁLEZ 7900 HARBOR ISLAND DRIVE ■ Add # A-825 ☐ Remove North bay Village FL 33141 \_□ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

nending any other info ·	ormation, enter change(s) here: (A	Attach additional sheets, if nece	ssary.)
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ctive date, if other tha	n the date of filing:	(optio	nal)
effective date is listed, the date inserted in t	n the date of filing:  te must be specific and cannot be prior to da his block does not meet the applicable	te of filing or more than 90 days after statutory filing requirements, this	filing.) Pursuant to 605.0 date will not be listed
ment's effective date on	the Department of State's records.	, o q.	
	ayed effective date, but not an record is filed.		.m. on the earliei
1/20	/		
d	2017  Signature of a member or authorized		
1 /	Wand		
-	Signature of a member or authorized	representative of a member	
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	Maria Jose Typed or printed na	teras d	

Page 3 of 3

Filing Fee: \$25.00