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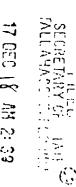
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COVER LETTER

TO:	Registration Sec Division of Corp		% ;	
		VESTMENT LLC		
SUBJ	ECT:	Name of Limi	ted Liability Company	
The er	nclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please	return all correspor	ndence concerning this matter t	o the following:	
		RODRIGO VINICIUS SAI	NTANA DOS SANTOS	
			Name of Person	
		PLANETA EXPRESS LLC	:	
		1-0-14	Firm/Company	
		627, SIESTA KEY CIR AP	PT.3125	
			Address	
		DEERFIELD BEACH - FI	.1 33441	
		financeiro@planetaexpressII		
		E-mail address: (t	o be used for future annual report notifi	eation)
For fu	rther information co	oncerning this matter, please ca	il:	
ROD	RIGO VINICIUS S	ANTANA DOS SANTOS	954 225-7386 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclo	sed is a check for th	e following amount:		
= \$3	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

BITS BR INVESTMENT LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp. $\frac{1.17000243427}{\text{Lorida document number}}$	es of Organization for this Limited Liability Company were filed on November, 28th 2017 cument number 1.17000243427	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
he new name must be distinguishable and contain the words "Limited L	liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		# SE
Principal office address MUST BE A STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	930 144 144
		A.
nter new mailing address, if applicable:		ry (1),
Mailing address MAY BE A POST OFFICE BOX)		မ္
6. If amending the registered agent and/or registered egistered agent and/or the new registered office address Name of New Registered Agent:		the name of the
New Registered Office Address:	Enter Florida street address	
	, Florida	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>	<u>Address</u>	Type of Action
MNGR	DONIZETE CARNIEL. MARCEI	627 SIESTA KEY CIR APT 3125	
		DEERFIELD BEACH, FL 33441	
			■ Change
			Remove
			Change
			Add
		□ Remove	
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Effective date, if other than the date of fi	ling:		(opti	onal)	
Effective date, if other than the date of fi If an effective date is listed, the date must be specific Note: If the date inserted in this block does no	and cannot be prior	to date of filing or i	nore than 90 days afte	r filling.) Pursuant to 60)5.(ste(
document's effective date on the Department of					
he record specifies a delayed effectiv The 90th day after the record is file	e date, but no ed.	t an effective	time, at 12:01	a.m. on the eari	Jie:
DECEMBER 13	2017				
Dated		 ;			
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