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		(Requestor's Name)
		(Address)
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_		(City/State/Z p/Phone #)
		PICK-UP WAIT MAIL
 		(Business Entity Name)
·		(Document Number)
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	s	pecial Instructions to Filing Officer:
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SECRETARY OF STATE
TALLAHASSEE. FLORIDA
18 MAR 21 PN 7: 27

	. ,		
		COVER LETTER	
TO	Registration Séction Division of Corporation	S	
SU	6125 W 20 Ave 31		
		Name of Limited Liability Company	
The	enclosed Articles of Amendm	ent and fee(s) are submitted for filing.	
Ple	ase return all correspondence c	oncerning this matter to the following:	
	Nory	s Altuve	
	Lada	Name of Person Investments, LLC	
		Firm/Company	
	7999	SW 58 Street	
	Mian	Address i, Florida 33143	
į	dcinor	City/State and Zip Code ys@gmail.com	
		E-mail address: (to be used for future annual report notification)	
	further information concerning rys Altuve	this matter, please call: 305 244-2479	
1	Name of Person	at () Area Code Daytime Telephone Number	
Enc	losed is a check for the followi	ng amount:	
		(additional copy is enclosed) Certified (e of Status &
	MAILING ADD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	ion Registration Section prations Division of Corporations Clifton Building	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1	6125 W 20 Ave 3	3 LLC	
	<u> </u>	ame of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The	e Articles of Organization for	this Limited Liability Company were filed on 02/09/2018	and assigned
Fld	rida document number L1800		
Th	s amendment is submitted to	amend the following:	
A.	If amending name, enter th	te new name of the limited liability company here:	
The	new name must be distinguishable	e and contain the words "Limited Liability Company," the designation "LI.C" or the abb	revistion 1.CZm
	name must be distinguishable	cand contain the words. Estimated Elability Company, the designation 1995. Of the acc	
Eni	ter new principal offices add	dress, if applicable:	AAH AA
(Pr	rincipal office address MUST	BE A STREET ADDRESS)	SK SK
l			7
Eni	 ter new mailing address, if a	 applicable:	2 8 6 6
- 1			
1772	uung uuness mair BEAT	<u> </u>	·
В.	If amending the registers	 ed agent and/or registered office address on our records, <u>enter t</u>	he name of the nev
. 11		v registered office address here:	
	Name of New Register	red Agent:	
1			_
1	New Registered Office		
	New Registered Office	e Address: Enter Florida street address	
	New Registered Office	Enter Florida street address, Florida	
		Enter Florida street address, Florida	Zip Code
Nev		Enter Florida street address, Florida	Zip Code
I he	w Registered Agent's Signatur ereby accept the appointmen	Enter Florida street address, Florida, Florida	ee to comply with the
I he	w Registered Agent's Signatur ereby accept the appointment visions of all statutes relati	Enter Florida street address , Florida, Florida	ee to comply with the miliar with and
I he pro ac c	w Registered Agent's Signatur ereby accept the appointment visions of all statutes relatice cept the obligations of my po	Enter Florida street address	ee to comply with the miliar with and f this document is
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If amend	ling Authorized Perso yed from our records:	n(s) authorized to m	anage, enter the title, name, and address of ea	ach person-being added
.	Manager - Authorized Member			
Title	<u>Name</u>		Address	Type of Action
AMBR	David Altuve		7999 SW 58 Street	
			Miami, FL 33143	■ Remove
				Change
MGR	Norys Altuve		7999 SW 58 Street	
			Miami, FL 33143	■ Remove
				Change
A MB R	Lada Investme	nts, LLC	7999 SW 58 Street	■ Add
			Miami, FL 33143	□ Remove
				□ Change
				Add
				Remove
:				Change
				Add
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				Change
' 			 	Add
				Remove
				Change

D.	It ame	nding any other into	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
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E.	 Effecti Than off	ve date, if other than	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0	0207 (3)(b)
↓ I	Note:	If the date inserted in th	is block does not meet the applicable statutory filing requirements, this date will not be listed to Department of State's records.	d as the
If (b)		ord specifies a dela 90th day after the	yed effective date, but not an effective time, at 12:01 a.m. on the earlie record is filed.	r of:
	Dated	march	9 2018	
i				
			Signature of a member or authorized representative of a member	
		 	Norys Alture Typhdor printed name of signee	
			- y present in the or signed	
			Page 3 of 3	
			Filing Fee: \$25.00	