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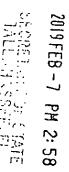
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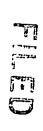


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COVER LETTER

	Registration Division of C	a Section Corporations				
	Additior	n of Authorized personnel to manage the LLC				
SUBJEC	SUBJECT: Name of Limited Liability Company					
The enclo	sed Articles	of Amendment and fee(s) are submitted for filing.				
Please ret	urn all corres	spondence concerning this matter to the following:				
		Ada Fernandez				
		Name of Pe	rsen			
		FERNANDEZ INVESTMENTS & CONSU	ILTING LLC			
		Firm/Comp	any			
		2800 SW 26TH ST				
		Address	<u></u>			
		Miami F1, 33+33				
		City/State and Z	ip Code			
		fernandezada11@yahoo.com				
		E-mail address: (to be used for future	e annual report notification)			
For furthe	r informatio	on concerning this matter, please call:				
Marcos N		305 at (7647740			
	Nam	ie of Person Area Co	ode Daytime Telephone Number			
Enclosed	is a check fo	or the following amount:				
\$25.0	0 Filing Fee	Certificate of Status Certified C				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

FILED

2019 FEB -7 PM 2:58

FERNANDEZ INVESTMENTS & CONSULTING LLC

(Name of the Limited Liability Company as it now appears on our records 1975)

(A Florida Limited Liability Company)

(A LL AHAS The Articles of Organization for this Limited Liability Company were filed on $\frac{02/16/2018}{1}$ and assigned Florida document number $_L18000043278$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_. Florida <u> </u>

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>	Address	Type of Action
MGR	Marcos Martinez	2800 SW 26TH ST Miami FL 33133	■ Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			Add
			☐ Remove
			D Change

D. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	
E. Effect	tive date, if other than the date of filing: (optional)
(If an et	flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3):
docur	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
(b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
	Figure 1th one
Dated	February 4th 2019
	Signature of somewher or authorized representative of a member
	,
	Ada Fernande

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00