

L18000 110055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500314545285

06/18/18--01025--017 \*\*30.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUN 18 AM 9:05

N COOPER

JUN 20 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Investment ODK LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ISIS Isabel  
Name of Person

HITAX Invest Corp  
Firm/Company

1860 N Pine Island Rd  
Address

Plantation FL 33322  
City/State and Zip Code

ISISTAX@aol.com  
E-mail address: (to be used for future annual report notification)

Suite  
109-1111  
1112

For further information concerning this matter, please call:

ISIS Isabel at ( 754 ) 600 5801  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Investment ODK LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 02 2018 and assigned  
Florida document number LI 8000110055

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)

SECRETARY OF STATE  
DIVISION OF CORPORATION  
18 JUN 18 AM 9:05

**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*

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	Danny Lopez	320 NW 132ND Ave	<input type="checkbox"/> Add
	Bedoya	Miami FL 33182	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mgr	ORFELIA Bedoya	320 NW 132ND Ave	<input checked="" type="checkbox"/> Add
		Miami FL 33182	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mgr	KATHERINE Lopez	320 NW 132ND Ave	<input checked="" type="checkbox"/> Add
	Bedoya	Miami FL 33182	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Remove Danny Lopez Badoya  
320 NW 132nd Ave.  
Miami FL 33182

Mgr:  
Add: ORFELIA Badoya 320 NW 132nd Ave.  
Miami FL 33182

Add Mgr:  
KATHERINE Lopez 320 NW 132nd Ave.  
Badoya Miami FL.  
33182

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective 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)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 05/01/18

ORFELIA Badoya  
Signature of a member or authorized representative of a member

ORFELIA Badoya  
Typed or printed name of signee

18 JUN 18 AM 9:05  
SECRETARY OF STATE  
DIVISION OF CORPORATION