48000112552

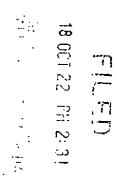
(Red	questor's Name)	
(Add	dress)	
(Ade	dress)	
(Add	nessy	
(City	//State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	





300319216013

10/23/18--01013--012 *+25.00



NOV 0.8 2018 T SCHROEDER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Iman Investments, L.C. 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:
Rene Reyna
Iman Investments, LLC. Firm/Company
15450 SW 308 St.
Homestead, Fl 33033
Sweethome Ioan @ aol. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rene Reyna at (786) 797.4623 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Solution Status Solution Solut

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

Iman In	vestme	ents, L	LC.		
(Name of the Limited L. (A F.	ability Company as it n lorida Limited Liability (ow appears on our reco Company)	irds.)		
The Articles of Organization for this Limited Liabili Florida document number <u>L18000112</u>	ity Company were fil 552	led on <u>5/4</u>	<u>/18 </u>	and assi	gned
This amendment is submitted to amend the following	ig:				
A. If amending name, enter the new name of the	limited liability cor	npany here:			
The new name must be distinguishable and contain the words	"Limited Liability Comp	nany." the designation "L	.LC" or the abbrevia	ition "L.I	C."
Enter new principal offices address, if applicable	:				
(Principal office address MUST BE A STREET A	DDRESS)				
				<u>;</u>	
Enter new mailing address, if applicable:			·	OCT 22	T _i
(Mailing address MAY BE A POST OFFICE BO)	<u></u>		· · · · · · · · · · · · · · · · · · ·		<u></u>
				<u></u>	
			= :	က _က်	
B. If amending the registered agent and/or registered agent and/or the new registered office		ldress on our reco	rds, <u>enter the</u>	<u>name (</u>	of the new
Name of New Registered Agent:	Rene	Reyna	<u> </u>		
New Registered Office Address:		Enter Florida street odd	lress		
			Florida		
-	City			p 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

Page 1 of 3

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>Address</u> **Type of Action** Title AMBR Rebecca Coronado _D Add _□ Change □ Add __ Change Y1 _□ Remove ___ Change □ Add _□ Remove _□ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change

				_						_
										_
						,				
 -				•						_
										_
										_
			- <u></u>		·					
					_	 -				
		<u>-</u> _						:[:		
						·			18 001	_
								•		
									-2	; -
									± C)	
								_ :	$\frac{\mathcal{P}}{2}$	
										_
Effective date, fan effective date Note: If the date	inserted in th	is block does	not meet th	he applicab			90 days after			
document's effec	Hive date on ii	ie Departmen	t of State s	s recoras.						
e record spe The 90th da				but not	an effect	ve time, a	et 12:01	a.m. on	the ea	rlier of
Data d										
Dated	$\overline{\Omega}$				<u>.</u> •					

Page 3 of 3

Filing Fee: \$25.00