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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
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## **COVER LETTER**

Division of Co			
BAIS INV	ESTMENTS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	RUBEN ZURGA		
		Name of Person	
	MIAMI ACCOUNTING &	MIAMI ACCOUNTING & TAX SERVICES LLC	
Firm/Company			
	13899 BISCAYNE BLVD		2
		Address	:
	NORTH MIAMI BEACH,		***
		City State and Zip Code	
	ruben@miatax.com E-mail address: (	to be used for future annual report note	•
For further information	concerning this matter, please or		
Ruben 2	Zurga	786 657-2521 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$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 Cupy (additional copy is enclosed)
Regis Divisi P.O. 1	ANG ADDRESS: tration Section ion of Corporations Box 6327 hassee, F1, 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	n rations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAIS INVESTMENTS LLC				
( <u>Name of the Limited</u> (A	Liab <mark>ility Compa</mark> A Florida Limited I	ny as it now appears ( hability Company)	in our records.)	
The Articles of Organization for this Limited Liab		were filed on 05/1:	5/2018	and assigned
Porida document number 1.18000121354				
his amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the wor	ds "Limited Liabil	lity Company," the des	ignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicat	ble:	C/O Miatax 13899	) Biscayne Blvd Ph9	
Principal office address MUST BE A STREET	lowing:  of the limited liability company here:  words "Limited Liability Company," the designation cable:  C7O Miatax 13899 Biscay North Miami Beach, FL 3  C7O Miatax 13899 Biscay North Miami Beach, FL 3  North Miami Beach, FL 3  Miami Accounting & Tax Services LLC  13899 Biscayne Blvd Ph9  Enter Florida street of North Miami Beach	ch, FL 33181	<u> </u>	
				'- <del></del>
		C/O Aliutax 13899	) Biscayne Blvd Ph9	
nter new mailing address, if applicable: Iailing <u>address MAY BE A POST OFFICE BON)</u>	North Miami Bea	ch, FL 33181		
bruning undress brate been 1 103 ( V/ 1 (V ) )	<u> </u>			<u> </u>
3. If amending the registered agent and/oregistered agent and/or the new registered offi	r registered of ice address her	ffice address on e e:	our records, <u>enter t</u>	the name of the
Name of New Registered Agent:	Miami Accoun	ting & Tax Services	LLC	
New Registered Office Address:	13899 Biscayno			
	North Miami B	leach	Florida <u>331</u>	81
		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>	Address	Type of Action
MGR	Sebastian Poneeliz	753 Shotgun Road	
		Sunrise, F1, 33326	E n
			☐ Change
MGR	Cristian Puga	C/O Miatax 13899 Biscayne Blvd	<b>=</b> Add
-		Ph9, North Miami Beach FL 33181	
			Change
			= - ☐ Remove : .
<del></del>			Add ,
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Signature of a member or authorized representative of a member		····		
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	Sign	ature of a member or authorized repre	sentative of a member	
Ruben Zurga	Ruben Zurga			

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Filing Fee: \$25.00