CU122175

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

	Registration S Division of Co			
CIED IE7**		NVESTMENT LLC		
SUBJEC	·	Name of Lim	ited Liability Company	
The enclo	sed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please reti	urn all corresp	ondence concerning this matter	to the following:	
		YOEL LEMAS ROMERC	•	
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		LEMAS INVESTMENT I	LC	
			Firm/Company	
		2021 SW 82 PL		
			Address	
		MIAMI FL 33135		
			City/State and Zip Code	
		YOEL1202@GMAIL.COM	1 to be used for future annual report n	Tail Court on
For further	r information	concerning this matter, please ca		ouncanon)
YOEL LE	EMAS ROME	RO	786 343-2218	
	Name	of Person	at () Area Code Dayt	ime Telephone Number
Enclosed i	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 Copy (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

LEMAS INVESTMENT LLC			
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited I dorida document number L18000122175	.iability Company were filed on $\frac{c}{c}$	05/16/2018 and assigne	:d
	<u> </u>		
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name o	of the limited liability company l	<u>nere</u> :	
e new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."	
nter new principal offices address, if appli	cable:		
rincipal office address MUST BE A STRE	ET ADDRESS)	6 × S	SE.
		AY	E F
		0F C 29	٦ ج
nter new mailing address, if applicable:		ORP OR	
Mailing address MAY BE A POST OFFICE	<u> </u>	- DKA	
·		45	7
. If amending the registered agent and egistered agent and/or the new registered of	office address here:	n our records, <u>enter the name of t</u> l	<u>he</u>
Name of New Registered Agent:	YOEL LEMAS ROMERO		
New Registered Office Address:	2021 SW 82 PL		
	Enter FI	orida street address	
	MIAMI	Florida 33155	
	Cuy	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>	Type of Action
AMBR	YOEL LEMAS ROMERO	2021 SW 82 PL MIAMI FL 33155	
			Remove
			Change
AR	YOEL D LEMAS JR		Add
		2021 SW 82 PL MIAMI FL 33155	■ Remove
			☐ Change
			□ Remove
			Change
			Add
			□ Remove
			Change
		 	
			☐ Remove
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			Add
			Remove
			□ Change

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A1AN 22				, but not an eff	ective time, at 1	2:01 a.m. on the	earlier (
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1244.4	Dated MAT 22 2016	Dated MAY 22	20	018			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00