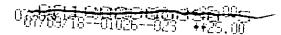
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## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	Clean 305 L	LC		
SCINECT.		Name of Limit	ted Liability Company	<del> </del>
The enclosed	i Articles of A	amendment and fee(s) are subn	nitted for filing.	
Please return	all correspon	dence concerning this matter t	o the following:	
		Ignacio M Alvarez		
			Name of Person	
		Alvarez   Gonzalez, LLP.		
			Firm/Company	
1 Alhambra Plaza, Suite 1130				
			Address	
		Coral Gables, Florida 33	134	
			City/State and Zip Code	
		imalvarez@algofirm.com		
		E-mail address: (to	o be used for future annual report noti	fication)
For further is	nformation co	ncerning this matter, please ca	11:	
Ignacio M /	Alvarez		305 297-0643 at ()	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for the	e following amount:		
■ \$25.00 F	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:

TO:

**Registration Section** 

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**

(Name of the Limited Link		
(A Flor	bility Company as it now appears on o rida Limited Liability Company)	ur records.)
(71.01	rida Emilied Biabinty Company)	
The Articles of Organization for this Limited Liability	v Company were filed on 07/03/20	018 and assigned
	and assigned	
Florida document number L18 161505	·	
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I.	Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		i s
(Principal office address MUST BE A STREET AD)	DPECC)	
Frincipal office address MOST BE A STREET ADD	DRESS)	
		<u> </u>
		<b>P</b> 220
Enter new mailing address, if applicable:		<b>=</b>
<u>.</u>		45
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office as Name of New Registered Agent:		records, enter the name of the n
		and address
New Registered Office Address:	Enter Florida str	eer aaaress
New Registered Office Address.	Enter Florida sv	
New Registered Office Address.	Enter Florida str	, Florida Zip Code
New Registered Office Address.  New Registered Agent's Signature, if changing Registered	City	, Florida

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
MGR	Alvarez Investments LLC	1825 Ponce De Leon Bivd	
		Suite 611	Remove
		Coral Gables, Fl 33134	□ Change
MGR	ALGO Investments LLC	1825 Ponce De Leon Blvd	Add
		Suite 611	☐ Remove
		Coral Gables, FI 33134	Change
		·	□ Remove
			Change
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fective date, if other than to an effective date is listed, the date in the listed in this current's effective date on the	he date of filing: must be specific and ca block does not mee	nnot be prior to da t the applicable	te of filing or more	(option than 90 days after the equirements, this	filing.) Pursuant to (	605.020 isted as
record specifies a delay		e, but not ar	n effective tim	e, at 12:01 a	.m. on the ea	rlier o
The 90th day after the r			^			
The 90th day after the r 07/03/2018 ited		alli	l C	/		

Page 3 of 3

Filing Fee: \$25.00