118000/61749

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COVER LETTER

TO:

	stration Section of Corp					
SUBJECT:		SETTIMO INVESTME	NTS LLC			
SUBJECT: _		Name of Lin	nited Liability Company			
The enclosed .	Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please return a	all correspond	dence concerning this matter	to the following:			
			ANGELA MACK			
			Name of Person			
		TAX ACCOUNT	ING & FINANCIAL SPECI	ALISTS, LLC		
		Firm/Company				
		2295 S. HIAWASSEE RD STE 407F				
		Address				
		ORLANDO-FLORIDA 32835				
		City/State and Zip Code				
		ADMIN@CREATRIXOFFICES.COM E-mail address: (to be used for future annual report notification)				
For further info	ormation con	cerning this matter, please c	·			
	ANGELA	маск	407 710-08	308		
	Name of P	erson		Daytime Telephone Number		
Enclosed is a c	heck for the	following amount:				
■ \$25.00 Fili	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certificate of Status & Certified Copy (additional copy is enclosed)		
	Registrati Division o	G ADDRESS: on Section of Corporations	Registration Division of C	Corporations		
	Division of P.O. Box			Corporations		

2661 Executive Center Circle Tallahassee, Fl. 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF ENLED

SETTIMO INVESTMENTS LLC

	iability Company as it now appears on our records) (2) 45 lorida Limited Liability Company) (3) 5		
The Articles of Organization for this Limited Liabili Florida document number <u>1.18000161749</u>	lity Company were filed on 97/8 2201874 CS 47 STE TALLARASSEL, FLORIBA and assigned		
This amendment is submitted to amend the following	ıg:		
A. If amending name, enter the new name of the	: limited liability company here:		
AMERICA PARTNERS INVESTMENTS, LLC			
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	e: 1520 E ALTAMONTE DR		
(Principal office address MUST BE A STREET AI	CACCEL DEDDAY ELODHAA 22726		
Enter new mailing address, if applicable:	1520 E ALTAMONTE DR		
(Mailing address MAY BE A POST OFFICE BOX	X) CASSELBERRY-FLORIDA 32730		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new address here:		
Name of New Registered Agent:	TAX ACCOUNTING & FINANCIAL SPECIALISTS, LLC		
New Registered Office Address:	2295 S. HIAWASSEE RD STE 407F		
	Enter Florida street address		

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.

ORLANDO City

If Changing Registered Agent. Signature of New Registered Agent

Florida $\frac{32835}{Zip\ Code}$

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
	-		□ Add
			☐ Remove
			☐ Change
			□ Remove
			Change
			Add
			□ Remove
			□ Change
			☐ Remove
			Change
			
			☐ Remove
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	N/A
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•	
fect	ive date, if other than the date of filing:
m efi <u>ot</u> e:	fective 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 605.02. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
cun	nent's effective date on the Department of State's records.
re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
The	90th day after the record is filed.
	5011
ted	2019.
	7
	· Tour
	Signature of a member or authorized representative of a member

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