## 11800161918

,	(Requestor's Name)	
_	(Address)	
	(Address)	•
	(City/State/Zip/Phone #)	
PICK-UP	P WAIT MAIL	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions	to Filing Officer:	





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## **COVER LETTER**

Division of C	orporations		
	UE INVESTMENTS, LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	BRYAN R. RAMOS		
		Name of Person	
		Firm/Company	
	8603 S. DIXIE HWY., #20	07	
	MIAMI, FL, 33143	Address	<del>,                                    </del>
	bryan@cassramos.com	City/State and Zip Code	<u> </u>
Von forther information		to be used for future annual report notif	ication)
BRYAN RAMOS	concerning this matter, please c	305 156 7778	
Name	of Person	at ()	Telephone Number
Enclosed is a check for	the following amount:		
S25.00 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

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 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**

7 AVENUE INVESTMENTS, LLC

( <u>Name of the Limited Liability Compar</u> (A Florida Limited E		
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number 1.18000161918		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
		<u> </u>
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		. )
(Principal office address MUST BE A STREET ADDRESS)		<u>:</u>
		:
		15
Enter new mailing address, if applicable:		~~
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
	· · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	. Flor	ida
	, Flor	ridaZip Code

isions 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	NATIONAL SAFE HARBOR EXCHANGES, CORP	10 SOUTH LASALLE STREET. 31ST FLOOR, CHICAGO, IL.	Add
			Remove
			□ Change
MGR	RAMIRO RAMOS	8603 S. DINIE HWY, #207, MIAMI, FL 33143	■ Add
			Remove
			☐ Change
MGR	RAFAEL RAMOS	8603 S. DINHE HWY, #207, MIAMI, Ft. 33143	■ Add
			Remove
			Change
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12/04/2018	
fective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date.  If the date inserted in this block does not meet the applicable cument's effective date on the Department of State's records.	(optional) ate of filing or more than 90 days after filing.) Pursuant to 605.02 statutory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not ar The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the earlier
DECEMBER 4 2018	
Signature of a member or authorized	d representative of a member
•	•

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Filing Fee: \$25.00