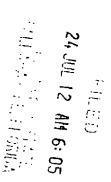
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(Requestor's Name)
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COVER LETTER

TO: Registration Se Division of Cor	ction porations	·	
	STMENTS, LLC.		
SUBJECT:	Name of Limite	ed Liability Company	
	Amendment and fee(s) are submondence concerning this matter to		
rease retain an estreop.	ROBERT C. EBER		
		Name of Person	
	ATTORNEY AT LAW		
		Firm/Company	_
	9415 SUNSET DRIVE, SU	ITE 258	
		Address	
	MIAMI, FLORIDA 33173		
	reber@roberteberlaw.com	City/State and Zip Code	
	E-mail address: (1	to be used for future annual report notific	cation)
For further information	concerning this matter, please ca	all:	
ROBERT C. EBER		305 595-1728	
Name	of Person	at ()	Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	n Section Corporations	Street Address: Registration Second Division of Core The Centre of Tallahassee. FL	porations 'allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NBI INVESTMENTS, LLC. (Name of the Limited L.) (A.F.)	iability Compar Iorida Limited L	ny as it now appears on our r liability Company)	ecords.)		
The Articles of Organization for this Limited Liabi Florida document number L18000173611	lity Company	were filed on July 18, 2011	8	and ass	signed
This amendment is submitted to amend the followi	ng:				
A. If amending name, enter the new name of th	e <u>limited</u> liabi	ility company here:			
The new name must be distinguishable and contain the word	s "Limited Liabil	lity Company," the designation	"LLC" or the ab	breviation "I	L.C."
		6410 S. W. 88th Path			
Enter new principal offices address, if applicable:		Miami, Florida 33173			26
(Principal office address MUST BE A STREET A	1DDRESS/			(<u></u>
The same address if applicable		6410 S. W. 88th Path		3	12
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Miami, Florida 33173			8 6 8
B. If amending the registered agent and/or reg agent and/or the new registered office address l	<u>here</u> :		enter the nan	ne of the no	ew regist
Name of New Registered Agent:	Joaquin V. Inig	<u> </u>			_
New Registered Office Address:	6410 S. W. 88	th Path Enter Florida street		<u> </u>	
	Miami	City	, Florida <u></u>	Zin Cod	

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 Agens 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
P	Nuria L. Inigo	.8731 SW 54 Street, Miami, Florida 33165	
			≣Remove
		 	□Change
MGR	Joaquin V. Inigo	6410 S. W. 88th Path, Miami, Florida 33173	\equiv Ad d
			□Remove
			□Change
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			□Remove
			□ Change

Effective date, if other than the date of filing:		
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Effective date, if other than the date of filing: (Optional) (If an effective 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 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filled. Dated July 5 2024	-	
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Filing Fee: \$25.00