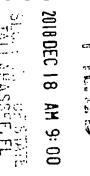
48000196776

| | questor's Name) | |
|-------------------------|-------------------|-----------------|
| (Re | equestors marrie) | |
| | | |
| (Ad | dress) | |
| | | |
| (Ad | dress) | |
| | | |
| (Cit | y/State/Zip/Phone | : #) |
| | | |
| PICK-UP | WAIT | MAIL |
| | | _ |
| | | |
| (Bu | siness Entity Nam | ne) |
| | | |
| (Do | ocument Number) | |
| | | |
| Certified Copies | _ Certificates | of Status |
| | | |
| | | |
| Special Instructions to | Filing Officer: | j |
| | | |
| | | |
| | | |
| | | |
| | | j |
| | | |
| | | _ |

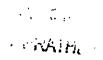
Office Use Only



200322076052



12/18/18- 01012--017 **20.00



COVER LETTER

| TO: | Registration S Division of Co | | | |
|---------------|----------------------------------|--|---|---|
| eum ic | | NVESTMENTS LLC | | |
| SUBJF | :C1: | Name of Lim | ited Liability Company | |
| The end | closed Articles o | of Amendment and fee(s) are sub | mitted for filing. | |
| Please : | return all corresp | nondence concerning this matter | to the following: | |
| | | GABRIELA SETRAKIAN | ų | |
| | | | Name of Person | |
| | | ARGENTAX LLC | | |
| | | | Firm/Company | |
| | | 1241 CANARY ISLAND | DR | |
| | | | Address | |
| | | WESTON, FL 33327 | | |
| | | gabysetrakian@gmail.com | City/State and Zip Code | |
| | | E-mail address: (| to be used for future annual report notif | ication) |
| For tur | ther information | concerning this matter, please ca | all: | |
| GABR | IELA SETRAK | IAN | 786 458-3493 | |
| | Name | of Person | at () Area Code Daytime | Telephone Number |
| Enclose | ed is a check for | the following amount: | | |
| ■ \$2: | 5.00 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

TO:

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

JUAISA INVESTMENTS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/16/2018}{1}$ Florida document number $\frac{1.18000196776}{-}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida Circ

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> | Address | Type of Action |
|--------------|----------------|---------------------|----------------|
| MGR | Zaida B. Rizzo | 1212 ALEXANDER BEND | |
| <u> </u> | | WWW.TON IT AND | |
| | | WESTON, FL 33327 | □ Remove |
| | | - - | LI Remove |
| | | | ☐ Change |
| | | | |
| | | | Remove |
| | | | Change |
| | | | |
| | | | Remove |
| | | | □ Change |
| | | | |
| | | | ☐ Remove |
| | | | Change |
| | | | |
| | | | ☐ Remove |
| | | | Change |
| | | | |
| | | | ☐ Remove |
| | | | ☐ Change |

| | 4 | | | | _ |
|--|-----------------------------------|--------------------------|--|--|-------------------------|
| | | | | · — — | _ |
| | | | | _ | - |
| | | | | | _ |
| | | · | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| - | | | | | _ |
| | | | | | |
| | | | | | |
| | | | | | _ |
| | | , | | | |
| | | | | | |
| | | | | | _ |
| | | | <u> </u> | | _ |
| | | | | | |
| | | | | | _ |
| | | | | | - |
| Tective date, if other than the date on effective date is fisted, the date must be ote: If the date inserted in this block ocument's effective date on the Department. | coes not meet the ap | plicable statutory film | (option: nore than 90 days after fill ng requirements, this da | al) ing.) Pursuant to 6 ate will not be li | 05.0207 isted as t |
| record specifies a delayed e The 90th day after the record | ffective date, but d is filed. | not an effective | time, at 12:01 a.n | | |
| DECEMBER 1st. | 2018 | ···· | | TALL | 2018 DEC |
| | Delle 9 |) | | P. T. A. | 8 |
| | nature of a member of | enthorized representativ | of a member | <u> </u> | AM 9: 00 |
| | | | | | 1 - |

Page 3 of 3

Filing Fec: \$25.00