L18000217730

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то:	Registration Se Division of Cor			
CHDIE	Abuvest Ll	C		
SUBJE	CI;	. Name of Limi	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Andres Antunez		
			Name of Person	
		Abuvest LLC		
			Firm/Company	
		41 SE 5th St Apt 1502		
			Address	
		Miami, FL 33131		
			City/State and Zip Code	·
		dthompson@intgteam.com E-mail address: (to be used for future annual report	notification)
For furt	her information of	concerning this matter, please co		
Andres	Antunez		786 556-7009)
	Name (of Person	Area Code Day	vtime Telephone Number
Enclose	ed is a check for t	he following amount:		
	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 Addre		Street Address Registration	
	Division of C P.O. Box 632			Corporations of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Abuvest LLC				
(Name of the Limited L (A F	iability Compa Torida Limited	iny as it now appears on our reco Liability Company)	ords.)	
The Articles of Organization for this Limited Liabil Florida document number L18000217730	ity Company	were filed on 9/13/2018	and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liab	oility company here:		
The new name must be distinguishable and contain the words	"Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable	e:	41 SE 5th St		
Principal office address MUST BE A STREET A		Apt 1502	021	
		Miami, FL 33131	<u> </u>	
Enter new mailing address, if applicable:		41 SE 5th St	<u> </u>	
Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	Apt 1502		
		Miami, FL 33131	N	
B. If amending the registered agent and/or registagent and/or the new registered office address he Name of New Registered Agent:		address on our records, <u>ent</u>	er the name of the new register	
New Paris and Office Address 4	41 SE 5th St, Apt 1502			
New Registered Office Address:		Enter Florida street ada	tress	
A	Miami		Florida 33131	
-		City	Zip Code	

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 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
			□Add
			□Remove
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			Remove
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Si	Andres gnature of a member or	Antune authorized rem	Esentative of a memb	per		
Dated	. 2020	······································				
e record specifies a delayed effective of d is filed.		ve time, at 12:	01 a.m. on the ear	lier of: (b) Th	e 90th day after	r the
Effective date, if other than the date from effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be k does not meet the a	prior to date of f oplicable statut	iling or more than 90	(optional) days after filing, nents, this date) Pursuant to 605 will not be liste	.0207 (1 ed as ti
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Filing Fee: \$25.00