L18 000232886

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(3.7)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600365010906

04/29/21--01014--012 **25.00

2621 KP; 29 PH 1: 23

Labora

COVER LETTER

TO:	Registration Se Division of Cor	ection porations		
SUBJE	CCT: _	SOUTH P	ACIFIC INVEST, LLC	
			mited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are su	skunian de e es	
		ndence concerning this matte		
			ELIEZER DURAN	
			Name of Person	
		DUF	RAN GROUP & ASSOCIATES B	,
			Firm Company	
		100		
			OIN FEDERAL HWY, SUITE 355	··
			Address	ing. DURAN FPerson & ASSOCIATES, P.A. Duppany L HWY, SUITE 355 ress BEACH, FL 33009 d Zip Code rouppa.com rture annual report notification) 305- 900-5515 a Code Daytime Telephone Number Filing Fee & S60.00 Filing Fee. Certificate of Status &
		HA	LLANDALE BEACH, FL 33009	
			City/State and Zip Code	
		E-mail address:	info@durangrouppa.com	itication)
For furth	er information co	ncerning this matter, please o		,
		ELIEZER DURAN		
	Name of	Person		ne Telephone Number
Enclosed	is a check for the	following amount:		
	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
I I F	Mailing Address: Registration Se Division of Co. P.O. Box 6327 Tallahassee, FL	ection rporations	Registration Sec Division of Cor The Centre of T	porations allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH PACIF	IC INVEST, LLC	
(Name of the Limited Liability Comp	nany as it now appears on our records.) Liability Company)	-
The Articles of Organization for this Limited Liability Company	v were filed on 10 02/2018	
Florida document number L18000232886		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oiliry company here:	
The new name must be distinguishable and contain the words "Limited Liab	lity Company "the decimation of LO"	
		opreviation "L.L.C."
Enter new principal offices address, if applicable:	1001 N FEDERAL HWY, SUITE 355	
(Principal office address MUST BE A STREET ADDRESS)	HALLANDALE BEACH, FL 33009	
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
——————————————————————————————————————		. 193
3. If amending the registered agent and/or registered office		ij
3. If amending the registered agent and/or registered office a tyent and/or the new registered office address here:	iddress on our records, enter the nam	e of the new registere
		<u> </u>
Name of New Parising La		المستورية المستورية المستورية المستورية
Name of New Registered Agent:		2
New Registered Office Address:		U CO
	Enter Floridu street address	
	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 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
MRGM	MANUEL O CLOSA SALGUERC	3701 N COUNTRY CLUB DR, APT 2103	□ Add
		AVENTURA, FL 33180	■Remove
			□ Change
			□Add
			Remove
			□Change
			□ Add
			□Remove
		-	□Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□ Change
			□Remove
			Change

 	
	
	
	
ective date, if of	ther than the date of filing: (optional) sted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207
n effective date is lis ite: If the date ins	sted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	e date on the Department of State's records.
	lelayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	APRIL, 2021
	Lidle
	Signature of a member or authorized representative of a member
	GLORIA J. SALGUERO DE CLOSA
	Typed or printed name of signee