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COVER LETTER

SUBJECT:		MAZZARELLA INVESTIME	NTS LLC						
Name of Limited Liability Company									
The enclosed	d Articles of .	Amendment and fee(s) are sub-	mitted for filing.						
Please return	i all correspo	ndence concerning this matter	to the following:						
		Jose Roberto Mazzarella							
			Name of Person						
		6965 Piazza Grande Ave, S	Firm/Company						
		0703 Flazza Grande Ave, 3	Address						
		Orlando FI. 32835	Address						
		admin@aesaccounting.net	City/State and Zip Code	<u>, , , , , , , , , , , , , , , , , , , </u>					
		E-mail address: (€	o be used for future annual report no	tilication)					
For further is	nformation c	oncerning this matter, please ca	ill:						
Alejandra L	•		at () 530 0958 Area Code Daytii						
	Name o	f Person	Area Code Daytii	ne Telephone Number					
Enclosed is	a check for th	ae following amount:							
≘ \$25.00 F	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:

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahussee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAPKE & MAZZARELLA INVESTIMENTS 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 $\frac{10/03/2018}{10/03/2018}$ and assigned Florida document number $\frac{1.18000234214}{1.18000234214}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: KAPPKE & MAZZARELLA INVESTMENTS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC," 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 number of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 6965 Piazza Grande Ave, Suite 314 New Registered Office Address: Enter Florida street address Orlando

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.

f 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 Title Address **Type of Action** Name _□ Add ☐ Remove _ Change □ Add _□ Remove _□ Change □ Add □ Remove __ Change □ Add ____ □ Remove _____ Change ____ □ Add _____ □ Remove ____ Change _□ Add ____ Remove

☐ Change

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an effective date i lote: If the date	f other than the d is listed, the date must h inserted in this bloc tive date on the Dep	e specific and o k does not me	cannot be prior eet the applic	to date of filing	or more than 90	(optional days after filing nents, this date	g.) Pursuant to 605.0)207 1 as
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Filing Fee: \$25.00