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2020 FPR 30 PH 1:41

C GOLDEN MAY 1 5 2020

UBJECT: 392 INVESTMENTS LLC Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following:
JOSEPH BALLMER Name of Person
397 INVESTMENTS, LLC Firm/Company
13123 SW 64th Ct. Address
MIAMI FL 33156 City/State and Zip Code
TONITBAUMER & GMAIL - COM E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Name of Person at (973) 699 2589 Name of Person Area Code Daytime Telephone Number
nclosed is a check for the following amount:
X \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section

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

Registration Section Division of Corporations

TO:

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

392 INVEST	MENTS	,		2020 50	30 PH 1:4
(Name of the Limited (A	Liability Compar Florida Limited L	iy as it now appear iability Company)	s on our record	<u>is.</u>)	,
The Articles of Organization for this Limited Liab Florida document number_\%\0000\2\4000	ility Company				_ and assigned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the					
The new name must be distinguishable and contain the word	ls "Limited Liabili	ty Company," the d	esignation "LLC	or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicab	le:	13123			<u>(</u>
(Principal office address MUST BE A STREET	<u> 4DDRESS)</u>	TMAIM	FL	33156	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)x)</u>	13123 MIAMI	5W FL	64M 3315	-
B. If amending the registered agent and/or registered agent and/or the new registered office address l		ddress on our r	ecords, <u>enter</u>	the name o	f the new reg
Name of New Registered Agent:	Joset	H BAU	NER		
New Registered Office Address:	13123	SW			
	MIA	Enter Flor City	ida street addre		315W 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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JENNY BAUMER	13123 SW 64th Ct.	9 \$\(\text{Add}\)
		MIAME, FL 33156	□Remove
			□Change
MGT	DONED (TLASSBERY	13611 5 DIXTE HWY	□Add
		MIAMI, FL 33176	Kemove
			□ Change
AMBR JOSEPH	JOSEPH BAUMER	13123 SW WHT CT.	Þ/Add
		MIAME, FL 33156	□Remove
		·	□Change
AMBR	DAUTO GLASSBERY	13611 5 DIXIE HWY	□Add
		MTAME, FL 33176	Remove
			□ Change
			□Adđ
			Remove
			□Change
	·		□Add
			□Remove
			□ Change

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. Il ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated_	4/24/2020.
	Signature of a member or authorized representative of a member
	Toseph Baumer Typed or printed name of signee

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