L19000030116

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S TALLENT APR 3 0 2019 2019 APR 17 AM 8: 28 SECRETARY OF STATE

COVER LETTER

TO:	Registration Se Division of Cor						
CLUB		VESTMENTS LLC					
SUBJECT:Name of Limited Liability Company							
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	e return all correspo	ondence concerning this matter	to the following:				
		MARCUS LEAO FILARDI					
			Name of Person				
		MF CONSULTING LLC					
			 Firm/Сотралу				
			Address				
	MIAMI , FL 33181						
		MARCUS@MFCONSULTIN	City/State and Zip Code IGUSA.COM				
		E-mail address: (to be used for future annual report notit	ication)			
For fu	arther information e	oncerning this matter, please co	all:				
MAR	CUS LEAO FILA	RDI	786 329 1234				
	Name o	f Person	Area Code Daytime	: Telephone Number			
Enclo	sed is a check for th	ne following amount:					
□ \$:	25.00 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:

, TO:

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 Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABUAIZ INVESTMENTS LLC	
(Name of the Limited Liability Compa) (A Florida Limited L	ny as It now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L19000030116	
This amendment is submitted to amend the following:	SECRETAR TO SECRETAR TO SECRETAR TO SECRETAR TO SECRETAR TO SECRETAR TO SECRETAR SECRETAR TO SECRETAR
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	5335 NW 87TH AVE . STE C109 #15975 2
(Principal office address MUST BE A STREET ADDRESS)	DORAL FL , 33178
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5335 NW 87TH AVE . STE C109 #159 DORAL FL . 33178
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
	, Florida

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>	<u>Address</u>	Type of Action
AMBR	ALEXANDRA RIBEIRO BUAIZ	R MAJOR CLARINDO FUNDAO, 63 APTO. 1401 , PRAIA DO	■ Add
		CANTO	
		29055-665 	□ Remove
			Change
			Remove
			Change
			Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			☐ Add
			□ Remove
			Change

If ainending any other information, enter change(s) here: (Attach add	litional sheets, if necessary.)
•	
	<u></u>
04/15/2019	
Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to date of filing of Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605.0207 (3) thing requirements, this date will not be listed as the
ne record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier of:
Dated 04/15/2019	
Signature of a member or authorized representat	ive of a member
ALEXANDRE ZORZANELLÍ BUAIZ	
Typed or printed name of signed	•

Page 3 of 3

Filing Fee: \$25.00