## L19000052546

(Re	equestor's Name)	
(Ac	ddress)	
(Ác	ddress)	
(Ci	ty/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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## **COVER LETTER**

Division of C	Section Corporations			
ROCKE	FELLER INVESTMENTS LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corre	spondence concerning this matter	to the following:		
	ALZATE, GERARDO			2019 M
		Name of Person		APPROVE BIGGEREA SEGRETARIO
	<u></u>	Firm/Company	<u> </u>	图 3
	15001 bay rd			NED NED NED
		Address		
	miami beach fl 33139			
		City/State and Zip Code		
	E-mail address: (	to be used for future annual report notif	ication)	
For further information	on concerning this matter, please c	all:		
ALZATE, GERARD	00	786239483 i		
Nar	ne of Person		Telephone Number	
Enclosed is a check for	or the following amount:			
■ \$25.00 Filing Fee	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee &: Certified Copy (additional copy is enclosed)	Certified	e of Status &
	AN INC. APPEND	ethret/count	ED ADDDESS.	

MAILING ADDRESS:

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

( <u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) led Liability Company)	<del></del>	
The Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for this Limited Liability Comparing the Articles of Organization for Organization for the Articles of Organization for the Organization for the Articles of Organization for the	es of Organization for this Limited Liability Company were filed on 02/22/2019 cument number L19000052546		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited 1	iability company here:		
		<b>20</b>	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or t	he abbreviation L.C."	
Enter new principal offices address, if applicable:		APP ARP	
(Principal office address MUST BE A STREET ADDRESS	2	<u> </u>	
		× 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		18.18.19.19.19.19.19.19.19.19.19.19.19.19.19.	
Enter new mailing address, if applicable:		06	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		nter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florid	a	
	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
AMBR	ALZATE, GERARDO	1500 BAY ROAD MIAMI BEACH FL 33139	Add
			□ Remove
			□ Change
<del></del>			APP
			APPROVEU AND AND FILED PRINTED REINTON STATE AND REINTSSEE FLOOR
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(If an effective dat	, if other than the e is listed, the date mus	at be specific and car	nnot be prior to date	of filing or more than	(optional) 90 days after filing	.) Pursuant to 605	.0207 (3)(b
Note: If the da document's eff	ate inserted in this bl ective date on the D	ock does not mee epartment of Stat	t the applicable se's records.	tatutory fifing requi	rements, this date	Will not be use	id as the
the record co	ecifies a delayed	d offective dat	e hut not an	effective time	at 12:01 a.m.	on the earli	er of:
) The 90th o	day after the rec	ord is filed.	L	enective time, t	,	on the carm	J. U
Dated O	1/06/19.		$\Lambda$ , $\Lambda$				
Dated _ CE	<u> </u>	7 11 -	TH 1	$\bigcirc$			
		\ '\ <del>  = =</del>	dict				
		Signature of a me	mber or authorized	representative of a me	ember		

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Filing Fee: \$25.00