L190000 84944

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	





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SECRETARY OF STATE

COVER LETTER

TO:

TO: Registration So Division of Cor				
	VESTMENTS ARKOMA, LL	С		
SUBJECT:	Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	DAMASO W. SAAVEDR	A, ESQ.		
		Name of Person		
	ĐAMASO W. SAAVEDR	A, P.A.		
		Firm/Company		
	888 SE 3RD AVENUE, S	UITE 500		
		Address		
	FORT LAUDERDALE, F	L 33316		
		City/State and Zip Code		
	DSAAVEDRA@SAAVLA			
For further information c	oncerning this matter, please c	to be used for future annual report noti all:	meanon	
JUDY ANDREWS		954 556-6467		
Name o	(Person		ne Telephone Number	
Enclosed is a check for t	he 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 Registration		Street Address: Registration Se	ction	
Division of Corporations		Division of Cor	Division of Corporations	
P.O. Box 6327		The Centre of T		
Tallahassee, FL 32314		2413 N. MONTO	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SOTEX INVESTMENTS ARKOMA, LLC

(Name of the Limited Liability	Company as it now appears on our records.)	
(A Florida L	limited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L19000084944	mpany were filed on MARCH 27, 2019	and assigned
Florida document number	÷	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET ADDRE	<u></u>	
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
	<u> </u>	
B. If amending the registered agent and/or registered of fine address borns	office address on our mooneds enter the ne	mo of the monte agistar ad
agent and/or the new registered office address here:	office address on our records, enter the na	25
		- 表表 ゆ : : : : : : : : : : : : : : : : : : :
Name of New Registered Agent:		
•		1: L
New Registered Office Address:	Enter Florida street address	- F# 6-
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered .	Agent:	
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my duties, and I am ont as provided for in Chapter 605, F.S. O	n familiar with and r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	DAMASO W. SAAVEDRA	888 SE 3RD AVENUE, SUITE 500	
		FORT LAUDERDALE, FL 33316	■Remove
			□Change
MGR DENNIS STEWART	DENNIS STEWART	P.O. BOX 39894	Add
		FORT LAUDERDALE, FL 33339	Remove
			□Change
			□Add
			□Remove
			□Change
			∐Add
		□Remove	
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			□Add
			□Remove
			□Change

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•	
E. Effect	ive date, if other than the date of filing:
(If an ef Note:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
docun	nent's effective date on the Department of State's records.
	j
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
record is f	led.
D-4 - 4	OCTOBER 31 2022
Dated	
	Signature of a member or authorized representative of a member
	DAMASO W. SAAVEDRA
	Typed or printed name of signee

·, · · · ·

Filing Fee: \$25.00