

219000 113112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

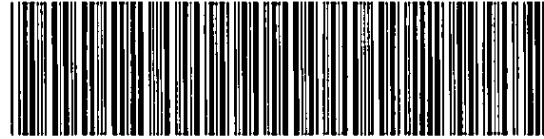
(Business Entity Name)

(Document Number)

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05/13/19--01031--012 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 MAY 13 PM 9:21

Amend

MAY 23 2019

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACOS INVEST LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

ERIC AMSALLEM

Name of Person

FLORIDA INVEST LLC

Firm/Company

15807 BISCAYNE BLVD SUITE 101

Address

HOLLYWOOD FLORIDA 33160

City/State and Zip Code

ERIC@FLORIDA-INVEST.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

ERIC AMSALLEM

786 985-1374
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2664 Executive Center Circle
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS
19 MAY 17 11 09:21

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

ACOS INVEST LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 MAY 13 AM 9:21

The Articles of Organization for this Limited Liability Company were filed on 04/25/2019 and assigned
Florida document number L19000113412.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, **Florida** 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	CONSTANTINO, ADRIEN	VILLA 80, AL MEJADMI STREET	☐ Add
		DUBAI, AE 26107-7 AE	☐ Remove
			☒ Change
MGRM	COSTANTINO, ADRIEN	VILLA 80, AL MEJADMI STREET	☐ Add
		DUBAI, AE 26107-7 AE	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ONLY THE NAME MUST BE CORRECTED:

C ONSTANTINO, ADRIEN. MUST BE CHANGED BY : COSTANTINO, ADRIEN

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 GRS 120-3
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 filed.

Dated MAY. 7 2019

Signature of a member or authorized representative of a member

ERIC AMISALLEM

Typed or printed name of signer