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(R€	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Nam	e)
(Dx	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

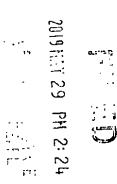
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R. WHITE JUN 15 2019



COVER LETTER

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Division of Cor	porations		
SUBJECT:	Flecha Cons	ultation, LLC	
SUBJECT.	Name of Lim	ited 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:	
	Cosme Arrieta		
	Flecha Consultation, LLC Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. pondence concerning this matter to the following: Cosme Arrieta Name of Person		
	Flecha Investment, LLC		
		Firm/Company	
	10418 Sun Villa Blvd		
		Address	
	Orlando, FL 32817		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	flecha.LLC@flechainvestn	nent.org	
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please co	all:	
Cosme Arrieta		407 007 4207	
Name o	f Person	at (407) 927-4397 Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

TO:

Registration Section

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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Flecha Consultation, LLC		2019 HEY 29 PM 2: 24
(Name of the Limit	ed Liability Company as it now appears on our recor (A Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Li Florida document number	ability Company were filed on May 5th, 2019	and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of Flecha Investment, LLC	the limited liability company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	B <i>OX</i>)	
B. If amending the registered agent and/ registered agent and/or the new registered of		ds, <u>enter the name of the ne</u>
Name of New Registered Agent:	Cosme Arrieta	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street addre	ess
		lorida
	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
	Arlinda Librado Fontanez		Add
			■ Remove
			Change
PRES Cost	Cosme Arrieta		
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			□ Remove
			□ Change

Effec	ive date, if other than the date of filing: (optional)
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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	cord 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	May 16 2019
-	
	Signature of a prember or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00