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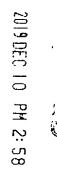
((Requestor's Name)
	(Address)
-	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
((Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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COVER LETTER

TO:	Registration Se Division of Cor					
/11 155 FF		vestment Realty Group, LLC				
SUBJI	:CI;	Name of Lim	ited Liability Company			
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Oswaldo Antonio Sanchez				
			Name of Person			
		Financial Investment Realt	y Group LLC			
			Firm/Company			
	5117 Terra Vista Way					
			Address			
	Orlando, Florida. 32837-4760					
		Financialloansigning l@gm	City/State and Zip Code ail.com			
		E-mail address: (to be used for future annual report notif	ication)		
For fur	ther information c	oncerning this matter, please ca	all:			
Oswal	do Antonio Sancho	ez	407 488-2361			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclos	ed is a check for th	ne following amount:				
\$ \$2	5.00 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)		

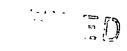
MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Financial Investment Realty Group, LLC

2019 DEC 10 PM 2: 58

(Name of the Limited Liab	oility Company as it now appears on our record rida Limited Liability Company)	<u>ls.</u>)
(7.170)	nda Emmed Omorniy Company)	
The Articles of Organization for this Limited Liability	Company were filed on 11/01/2019	and assigned
Florida document number L19000263610		
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "I	imited 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 AD	DRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	-	. <u> </u>
B. If amending the registered agent and/or re		s, enter the name of th
egistered agent and/or the new registered office a	udress here:	
Name of Nam Danistand Agants		
Name of New Registered Agent:		··
New Registered Office Address:		
	Enter Florida street addres	2,5
		orida
	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
MGRM	Iosvani Gonzalez	2804 Falling Tree CR Orlando, FL. 32837 US	
			Remove
			Change
MGRM	Jessica Gonzalez	2804 Falling Tree Cr Orlando, FL. 32837 US	
			■ Remove
			Change
MGRM	Wilma Sanchez	5117 Terra Vista Way Orlando, FL. 32837-4760 US	Add
			Remove
		_	Change
			Add
			□ Remove
			Change
		.	□ Remove
			☐ Change
			Remove
			☐ Change

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n effective ote: If the	late, if other date is listed, e date inserte effective dat	the date must b d in this bloc	e specific and k does not n	cannot be pric sect the appli	cable statutory f	or more than 90 d	_(optional) ays after filing.) P atts, this date wi	ursuant to 605,020 H not be listed as
record The 90t	specifies a h day afte	a delayed or the recor	effective d d is filed.	ate, but n	ot an effectiv	e time, at 1	2:01 a.m. or	the earlier o
ited						7		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00