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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corp	porations		
SUBJECT:	US CAPI Name of Li	TAL INVEST MEA	MS LLC
The enclosed Articles of a	Amendment and fee(s) are st	abmitted for filing.	
Please return all correspor	ndence concerning this matte	er to the following:	
	G	ERALDINE DUBE	ENCT LOCKWOOD
		Firm/Company	
	600	7 83 Ab St. #2	•
For further information co	E-mail address		alty (wg mail. com.
	•	20) . at (<u>754</u>) <u>245</u> Area Code Daytim	6949 c Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 Filing Fec	☐ \$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 S Division of Co	ection	Street Address: Registration Sec Division of Cor	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

US CAPI	TAL INVESTMENTS LLC
(Name of the Limite)	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia	ability Company were filed onand assigned
Florida document number <u>L 200000</u> ,	17.095
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE)	TADDRESS)
	ற்.
Enter new mailing address, if applicable:	5
(Mailing address MAY BE A POST OFFICE I	BOX)
agent and/or the new registered office addres	
Name of New Registered Agent:	DAVID LOCKWOOD.
New Registered Office Address:	DAVID LOCKWOOD. 6770 JND, AN CREEK. SR. Emer Florida street address NIAMI Beach Florida 33/4/ City Zip Code
	MiAMi Beach Florida 33/4/
Naw Dagistarad Agant's Signatura if changing D	

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

Title	Name	Address	Type of Action
MER	Geraldine WEERNET	_ 600 83° J#3	🗆 Add
	Lockwood	MiAni Beach, Fl. 33/4/	Remove
			□Chunge
AMBR -MGR	DAVID LOCKWOOD	6770 INDIAN Creek 5	ZC CBAdd
		6770 INSIAN Creek 5 MiAMi Beach, Fr. 33/4	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
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			Remove
			□Change

	2023
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rective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date te: If the date inserted in this block does not meet the applicable segment's effective date on the Department of State's records.	61 - 2023 (optional) e of filing or more than 90 days after filing.) Pursuant to 605.0 statutory filing requirements, this date will not be listed
secord specifies a delayed effective date, but not an effective time, a s filed.	t 12:01 a.m. on the earlier of: (b) The 90th day after
red <u>August 15</u> 2023:	
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