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(Requestor's Name)
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TO:

Registration Section

Division of Corporations

Tallahassee, FL 32314

41715 417415	ILL INVEST LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JUAN J. PEREZ		
		Name of Person	· • • • • • • • • • • • • • • • • • • •
	J. PEREZ LEGAL PA		
		Firm/Company	
	9710 STIRLING RD. #10	4-105	
		Address	·
	COOPER CITY, FLORID	A 33024	
		City/State and Zip Code	
	JPEREZ@JJPLEGAL.COM		
		to be used for future annual report noti	fication)
	concerning this matter, please c	aii;	
JUAN J. PEREZ		954 450-2585 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S	Section	Street Address: Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH HILL INVESTILLC

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

The Articles of Organization for this Limited Liability Compan	iy were filed on <u>JAN</u>	JUARY 23RD, 2020	and assigned
Florida document number L20000030015			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company her	<u>·e</u> :	
The new name must be distinguishable and contain the words "Limited Liab	bility Company." the de	signation "LLC" or the abbr	reviation "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 re	cords, 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 Floria	la street address	
		. Florida	
	City	, Florida	Zıp Code
New Registered Agent's Signature, if changing Registered Agent	<u>::</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of n provided for in Cl	ny duties, and I am fai papter 605, F.S. Or, if	niliar with and this document is

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>	Name	Address	Type of Action
MGR	Ernesto Giorgio	C/O J. PEREZ LEGAL PA, 9710 STIRLING RD	■Add
		SUITE 104-105, COOPER CITY FL 33024	□Remove
			□Change
		-	🗆 Add
			□Remove
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<u>vote:</u> ii the d	ate inserted in t	n the date of I ate must be specifi this block does i the Department	not meet the ap	opticable statute	ling or more than ory filing requi	(option 90 days after fi rements, this c	ial) ling.) Pursuant to late will not be	505.0201 isted as
record specif	ies a delayed et	fective date, but	t not an effecti	ve time, at 12:0)1 a.m. on the e	earlier of: (b)	The 90th day a	fier the
l is filed.			2020					
l is filed.	BER 7TH		,					
d is filed.	3ER 7TH		_`		>			
d is filed.	3ER 7TH	Signature o		authorized repres	> sentative of a me	mber		

Filing Fee: \$25.00