LZO 000034838

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
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(Bus	iness Entity Nai	me)
(Doc	ument Number))
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COVER LETTER

Division of Cor	porations		•	
	Investment LLC			
SUBJECT:	Name of Lin	ited Liability Company		
			ري.	- / - 優. k
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	.0	
Please return all correspo	ndence concerning this matter	to the following:		The state of the s
				3
	Ivan Leon			رئي څ
		Name of Person		
	Calusa 348 Investment IIc			
		Firm/Company		
	565 w 26 st.			
		Address		
	Hialeah, Fl, 33010			
		City/State and Zip Code		
	ivanialeon0102@gmail.com			
		to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please o	all:		
lvan Leon		786 287-8491 at ()		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ne following amount:			
	-	Coccoo Ellino	5 640 00 EU . F	
■ \$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 Addres	S:	Street Address:		

TO:

Registration Section

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

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Calusa 348 investement lic				
(Name of the Lim	nited Liability Compa (A Florida Limited	iny as it now appea Liability Company)	rs on our records.)	
he Articles of Organization for this Limited lorida document number L20000034838				and assigned
nis amendment is submitted to amend the fo	flowing:			
. If amending name, enter the new name	of the limited liab	ility company ho	ere:	
e new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the d	lesignation "LLC" or th	e abbreviation "L.L.C."
nter new principal offices address, if appl	icable:	325 Calusa St, I	.OT 348. Key Largo	, FL 33037
rincipal office address MUST BE A STRE	ET ADDRESS)			
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u> If amending the registered agent and/or tent and/or the new registered office addr	registered office a	address on our r	ecords, <u>enter the n</u>	ame of the new registe
Name of New Registered Agent:	Ivan Leon			-
New Registered Office Address:	565 w 26 st ,		<u> </u>	
		Enter Flor	rida street address	
	Hialeah		, Florida	33010
		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 amerding 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
mgr	Ivania Leon	565 w 26 st, hialeah fl 33010	□ Add
			Remove
			□Change
MGR	Ivan Leon	565 w 26 st. Hialeah , fl 33010	= Add
			□Remove
			□Change
			
			□ Remove
			□Change
			□Remove
			Change
			□Add
			🗀 Remove
			□Change
			□ Add
			□Remove
			Change

Als	o . I need to change the MGR name It was submitted Ivania (an IA at the end of the name by mistake).
Tha	nk You!
_	
-	
_	
ffecti : If t	date, if other than the date of filing:
ord sp filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
Fet	oruary ,12 2020
	//

Filing Fee: \$25.00