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COVER LETTER

O: Registration Section Division of Corporations
UBJECT: South Florida Investment Grp. LLC
Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
'lease return all correspondence concerning this matter to the following:
Bornie J. Blate Name of Person
South Florida Investment Grp. LLC Fim/Company 8440 S. Dixie Hwy #706
8440 S. Dixie Hwy # 706
Address
Michni FL 33143 City/State and Zip Code bib Keywest @ gmail com
DibKeywest@gMail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bonnie J. Blate at 305 942-4372 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\begin{array}{c} \$30.00 Filing Fee & \\ Certificate of Status \end{array}\$ \$55.00 Filing Fee & \\ Certificate Opy (additional copy is enclosed) \$\begin{array}{c} \$60.00 Filing Fee, \\ Certificate of Status & \\ Certified Copy (additional copy is enclosed) \end{array}\$
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: 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

South Flori	da 1	NVest M		LD. LLC
(Name of the Limited L (A F	iability Company a Iorida Limited Liab	is it now appears on o	our records.)	. 2
The Articles of Organization for this Limited Liabil Florida document number	ity Company we <u>20</u> . 6/4 ng:	re filed on <u>2</u>	-	and assigned
The new name must be distinguishable and contain the words	"Limited Liability (Company," the designa	tion "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable Principal office address MUST BE A STREET A	_	8440 · # 70	S.Dixi	e) Hwy.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	 KQ	8440 #70 Miam	S. Dix	(ie) Hwy 33143
B. If amending the registered agent and/or registagent and/or the new registered office address be		ress on our record	ls, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:				
New Registered Office Address:	8440	S Di) Enter Florida str	cee address	WY #706
	Mic	a.Ni	, Florida	33143
		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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

IGR = Manager

.MBR = Authorized Member

itle	<u>Name</u>	Address	Type of Action
MBR	John R. Scopetta	19500 SW 224 St Miann; FL 33170	
		777766777	Remove
			□Change
			□Add
			□Remove
			□Change
			DAdd
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ctive date, if other than the date of filing:	(option	al)	
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory f	or more than 90 days after fil	ing.) Pursuan ate will not	t to 605.02 be listed :
iment's effective date on the Department of State's records.		· · · · · · · · · · · · · · · · ·	
ord specifies a delayed effective date, but not an effective time, at 12:01 a.t filed.	m. on the earlier of: (b)	The 90th da	ay after th
2 2 2 2			
d <u>Sept. 12, 2023</u>			
)		
Borrie Garagember or authorized representation	<i>f</i>		