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(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	Y)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)
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(De	ocument Number)	
Certified Copies	Certificates o	f Status
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T. MATTHEWS NOV 1 9 2021

COVER LETTER

TO: Registration S Division of Co		•		
	INVESTMENTS USA, LLC			
SUBJECT: Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	_		
	DE	YANIRE GONZALEZ		
		Name of Person		
	ALL AMERICAN CORPORATE AND IMMIGRATION SERVICES LLC Firm/Company 950 S PINE ISLAND RD A-150 SUITE 1008		N SERVICES LLC	
		Address		
	PLANTATION, FL 3332-	1		
		City/State and Zip Code	<u> </u>	
	DEYANIRE@MYBURS.N	NET (to be used for future annual report not	if faution)	
For further information	concerning this matter, please o	•	incation)	
DEYANIRE GONZAL	EZ	305 9108081		
Name	of Person		ne Telephone Number	
Enclosed is a check for	the following amount:			
5 \$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 Addre Registration		Street Address: Registration Se	ection	
Division of Corporations		Division of Co	Division of Corporations	
P.O. Box 63 Tallahassee,		The Centre of ' 2415 N. Monro	Tallahassee oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	2110.15	
D & D INVESTMENTS USA, ILC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on MARCH 26,2020	and assigned
Florida document number L20000090505		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	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 ADDRES.	<u> </u>	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the na	ime of the new register
The second secon		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	

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.

City

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 21 NOV 10 PH 3: 21

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	BEATRIZ ELENA QUINTERO LOPEZ	1560 SAWGRASS CORPORATE PKW=449	□Add
		SUNRISE, FL 33323	■Remove
			Change
			□Add
			□Remove
		·	□Change
		·	
			Remove
			Change
		·	□Remove
			□Change
		. <u>. </u>	□Remove
		 	□Change
		□Add	
	 	Remove	
			□ Change

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Effective date, if other than the date of filing the effective date is listed, the date must be specified at	ng:
Note: If the date inserted in this block does not	meet the applicable statutory filing requirements, this date will not be listed as
document's effective date on the Department of	State's records.
e record specifies a delayed effective date, but no	of an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	
, CCTCBBR 28	2021
Dated Communication 20	1.
(`).	Mart
- XIII	JTU /
~ognature of a	d Member or authorized representative of a member
	PAOLA SANCHEZ
	Typed or printed name of signee

Filing Fee: \$25.00