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Certified Copies	Certificates	of Status
		
Special Instructions to F	iling Officer:	
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COVER LETTER

TO:	Registration Se Division of Cor			
OTIDAD		ESTMENTS LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		ERNESTO J CUEVAS		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		ERAL INVESTMENTS L	LC	
			Firm/Company	,
		4675 W 18TH CT SUITE	708	
		-	Address	
		HIALEAH, FL 33012		
			City/State and Zip Code	
		agom01@gmail.com	to be used for future annual report notific	estion)
For furt	her information c	oncerning this matter, please c	•	ations
		one coming this matter, preuse c		
EKNES	TO J CUEVAS Name o	f Dangan	305 803-4427 at ()	Felephone Number
	name o	rerson	Area Code Daytime	ectepnone (Number
Enclose	d is a check for th	ne following amount:		
□ \$ 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 Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sect Division of Corpe The Centre of Ta 2415 N. Monroe Tallahassee, FL 3	orations Hahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ERAL INVESTMENTS LLC

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

(7.1.101)	da cinited Elabinty Company)	
The Articles of Organization for this Limited Liability	Company were filed on $\frac{07/01/2020}{}$	Zafid assigned
Florida document number L20000186354		6 - A
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		nter the name of the new registered
Name of New Registered Agent:	···	
New Registered Office Address:	<u> </u>	
	Enter Florida street a	uddress
		_, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Degister	od Agants	

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

<u>Title</u>	Name	Address	Type of Action
MGR	ALFREDO G OLIVEROS	4675 W 18TH CT SUITE 708 HIALEAH, FL 33012	□Adđ
			■Remove
			□Change
		<u> </u>	□Add
		□Remove	
			□Change
<u>.</u>			□Add
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	07/21/2020
Arect Lan eft	ive date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
locum	ent's effective date on the Department of State's records.
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d is fi	ed.
	HH V 21
	JULY 21 2020
Dated	
Dated	Constant 1/1. 1/1
Dated	Signature of a member of authorized representative of a member

Filing Fee: \$25.00