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(Red	questor's Name)	
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COVER LETTER

	Registration Se Division of Cor			
CUD ICC	Ludwick Ll	LC		
SUBJEC"	1:	Name of Lin	nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Jose Olivier		
			Name of Person	
			Firm/Company	
		7405 Sw 13th Street		
			Address 68 City/State and Zip Code))
		North Lauderdale FL 3306	68 	ר כ כ
			City/State and Zip Code	`` -
		investmententer@gmail.com E-mail address: ((to be used for future annual report notification)	É
For furthe	r information c	oncerning this matter, please c	•	
Jose Olivi	ier		954 297-6047 at ()	
	Name o	f Person	Area Code Dayrime Telephone Number	
Enclosed i	is a check for th	ne following amount:		
□ \$25.0	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 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		Street Address: Registration Section	
Division of Corporations		orporations	Division of Corporations	
	P.O. Box 632 Fallahassee, F		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUDWICK, LLC					
(Name of the Limit	ed Liability Compar (A Florida Limited L	ıv as it now appears iability Compалу)	on our records.)		
The Articles of Organization for this Limited Li	ability Company	were filed on	07/20/2020	and assign	ed
Florida document number L20000210592	<u></u>				
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	the limited liabi	lity company her	<u>re</u> ;		
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company." the de:	signation "LLC" or the abb	reviation "L.L.C.	
Enter new principal offices address, if applica	able:	1126 S Federal H	wy #1148		
(Principal office address MUST BE A STREE	T ADDRESS)	Fort Lauderdale FL 33316			
				22	<u> </u>
Enter new mailing address, if applicable:		1126 S Federal H	wy #1148	SEP 2	80 NO151
Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	Fort Lauderdale [FL 33316		8.
					50 % 50 % 50 % 50 %
B. If amending the registered agent and/or re		ddress on our rec	cords, <u>enter the name</u>	of the new re	gistered
agent and/or the new registered office addres	<u>s here</u> :				
Name of New Registered Agent:	Jose L Olivier			<u></u>	
New Registered Office Address:	1126 S Federal F	Hwy #1148			
	<u></u>	Enter Florid	la street address		
	Fort Lauderdale		, Florida ³³³¹		
		Ciţv		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 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>	<u>Name</u>	Address	Type of Action
AMBR	Jean R Desir	1126 S Federal Hwy	
		1148	■ Remove
		Fort Lauderdale, FL 33316	[:]Change
MGR	Ben Francois	1126 S Federal Hwy	□Add
		1148	Remove
		Fon Lauderdale, FL 33316	⊔Change
			□Add
			22 Save 26 □ Remay 26
			26 Change Co
			Change 6
			□Remove
			Change
	,		□Add
			□ Remove
			⊔Change
			
			□ Remove
			Change

Effective date, if other than the date of filing: (Optional) (If an effective 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 605.02. (If an effective date is listed, the date must be specific and cannot be prior to date of filing requirements, this date will not be listed document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after dord is filed. Dated 9/23		
Effective date, if other than the date of filing:	<u> </u>	
Effective date, if other than the date of filing:		
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Effective date, if other than the date of filing: (optional) fan effective 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 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed locument's effective date on the Department of State's records. The effective date and effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed.		27. C)
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Filing Fee: \$25.00

Typed or printed name of signee