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T. MATTHEWS

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
WARA	INVESTMENT GROUP LLC		
Sobject.	Name of I	Limited Liability Company	
The enclosed Article	s of Amendment and fee(s) are	submitted for filing.	
Please return all corr	espondence concerning this mat	tter to the following:	
	HUGO PEREZ BRAVO	0	
	<del></del>	Name of Person	-
	WARA INVESTMENT	F GROUP LLC	
		Firm/Company	•
	1650 NE 135th STREE	Tr # 503	
		Address	-
	NORTH MIAMI, FL 33	3181	
		City/State and Zip Code	-
	WARAINVESTMENTO	-	
	E-mail addres	ss: (to be used for future annual report notification)	
For further information	on concerning this matter, please	e call:	
HUGO PEREZ BRA	VO	301 204-1250 at ( )	
Nan	ne of Person	Area Code Daytime Telephone Number	·
Enclosed is a check fo	or the following amount:		
■ \$25.00 Filing Fee	e □ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &
<u>Mailing Add</u> Registratio		Street Address: Registration Section	
Division o	f Corporations	Division of Corporations	
P.O. Box <i>(</i> Tallahasse	5327 e. FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 8	10
i arianias C	C. 1 12 2 2 7 1 T	4412 IN MONTOC Street, Suite 8	IU

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF .

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WARA INVESTMENT GROUP LLC

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

The Articles of Organization for this Limited Liability Company Florida document number <u>L20000228807</u>	y were filed on <u>07-31-2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	olity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	aZip Code
	City	wh com.

## 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 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>	<u>Address</u>	Type of Action
MGR	DANIELA PEREZ CARUSO	1650 NE 135th STREET #503,NORTH MIAMLELS	
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			DChange
			_ DAdd
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