L20000 268843

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	.
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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2022 NO7 28 | #4111: 33

COVER LETTER

TO: Registration Section

Division of Cor	rporations		
	vestment Group LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Nazario Betancourt		
		Name of Person	
		Firm/Company	
	6206 N 17TH STREET	1 min company	20
		Address	22 NO
	TAMPA FL 33610		2022 NOV 28 ATTHE 33
		City/State and Zip Code	
	selectiveautosine@gmail.co		
For further information of	concerning this matter, please c	to be used for future annual report noti	heation)
Nazario Betancourt		813 391-3359	
Name o	f Person		e Telephone Number
Enclosed is a check for the	he 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		Street Address:	, tion
Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	
Tallahassee, I	FL 32314		Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J Valdez Investment Group LLC		
(Name of the Limited Liab) (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L20000268843	Company were filed on September 08, 2020	and assigned
This amendment is submitted to amend the following:		2022 S.E.C
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or	the abbreviation (E.L.C."
Enter new principal offices address, if applicable:		20 10
(<u>Principal office address MUST BE A STREET ADD</u>	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	ed office 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	8 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 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	Nazario Betancourt	6206 N 17TH STREET	≘ Add
		TAMPA FL 33610	□Remove
			Bàdd Over the control of the contro
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
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			Charge

				
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				10 2 11 2
				
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			<u> </u>	
				
	be specific and cannot be	prior to date of filing	or more than 90 days after	ional)
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n effective date is listed, the date must te: If the date inserted in this bloom				
n effective date is listed, the date must te: If the date inserted in this blocument's effective date on the Dep ecord specifies a delayed effective	partment of State's rec	ords.		b) The 90th day after t
an effective date is listed, the date must ote: If the date inserted in this blood icument's effective date on the Dep record specifies a delayed effective is filed.	partment of State's rec	ords. ive time, at 12:01 a		b) The 90th day after t
Tective date, if other than the can effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the Department appearance of the date of the date of the Department of the date of the Department of the D	partment of State's rec	ords. ive time, at 12:01 a	m. on the earlier of: (b) The 90th day after t

Filing Fee: \$25.00