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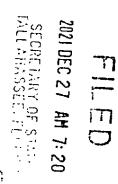
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COVER LETTER

Internation SUBJECT:	al Empire Investment LLC			
SUBJECT:		nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jala Ibrahim			
	 	Name of Person	•	
	International Empire Inve	estment LLC		
		Firm/Company		
	1015 Oakfield Dr., Unit 4	240		
	·	Address		
	Brandon, FL 33509			
	int.empireinvestment@gm	City/State and Zip Code nail.com		
	E-mail address: (to be used for future annual re	port notification)	
For further information of	oncerning this matter, please c	all;		
Jala Ibrahim			8699	
Name o	f Person	at () Area Code	Daytime Telephon	e Number
Enclosed is a check for il	ne following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



International Empire Investment 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 Compan	y were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designa	tion "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 record	s, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	vet address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent	•	είρ Coac
	_	N 76 4
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my d provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is
If Ch:	unging Registered Agent, <u>S</u>	gnature 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	Richie Madrigal		□Add
		280 Primrose Dr. Davenport FL 33837	⊠Remove
			□ Change
			□Add
			Remove
			□Change
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			Change

Page 2 of 3

Richie might be the same	as the LLC address, 131	5 Oakfield Dr. Unit	4240, Brandon FL 335	509
				
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5				
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	12/20/20	021		
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record specifies a delaye The 90th day after the rec		not an effective	time, at 12:01 a.m	. on the earlier
12/20/2021 ited	12:00PN	Л		
	Verified by PDFFiller	··		
	// L==			

Page 3 of 3

Filing Fee: \$25.00