## LZ0000359292

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Curings Falik Norm)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
l ·
į
ĺ





500356807975

12/28/20--01008--015 ++25.00

FILED PH 1:1,2

2/3/21

## **COVER LETTER**

TO: Registration Section

Division of Cor	porations			
TECH MOT SUBJECT:	FORS INVESTMENTS LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fects) are sub	emitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	CLAUDIA MENDRALES	;		
		Name of Person		
			<del></del>	
	17701 SW 18TH STREE)	Firm/Company		
		Address		
	MIRAMAR FL 33029			
	CBM.OFFICE.MGMT@G	City/State and Zip Code MAIL.COM		
	_	to be used for future annual report no	otification)	
for further information e	oncerning this matter, please e	all:		
CLAUDIA BRUCKMA	NN	786 510.1846 at ()		
Name o	i Person	at () Area Code Dayti	me Telephone Number	
inclosed 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)	Sectificate of Status & Certificate Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration Section		Registration Section		
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee		
P.O. BOX 6327 Tallahassoc FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our recordited Liability Company)	<u>(1s.</u> )					
e Articles of Organization for this Limited Liability Company were filed on $\frac{11/12/2020}{\text{Liability Company were filed on }}$ rida document number $\frac{\text{Liability Company were filed on }}{\text{Liability Company were filed on }}$		and assigned					
his amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited	liability company here:						
The new name must be distinguishable and contain the words "Limited	Liability Company." the designation "LLC	2" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:							
(Principal office address MUST BE A STREET ADDRES.	S)	20					
		29 0					
		PEC T ₹					
Enter new mailing address, if applicable:		. 8 =					
Mailing address MAY BE A POST OFFICE BOX)							
		12					
B. If amending the registered agent and/or registered offagent and/or the new registered office address here:	fice address on our records, <u>enter</u>	the name of the new registe					
Name of New Registered Agent:							
New Registered Office Address:		<del></del>					
	Enter Florida streat addre:	5,5					
		orida					
	City	Zip Code					

## w Registered Agent's Signature, if changing Registered Agent:

TECH MOTORS INVESTMENTS LLC

vereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability npany has been notified in writing of this change.

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	JOSE J SANTAMARIA RAMOS	192 BOSTON POST RD. #27	
		SUDBURY, MA 01776	Remove
			<b>≡</b> Change
			□ Add
			7020 Change F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			OD⊒Add 
			□ Change
		<del></del>	□ Add
			□Remove
			□ Change
			□Add
		□Remove	
-			
			□ Remove

	<del> </del>		·	
	_ <del>-</del> ·			
	<del></del>	<del></del>		~
	<del> </del>			2020 [
				DE T
	<del></del>			711_E
		<del></del> -		PH D
		<del> </del>		
			<del></del>	
ctive date, if other tha	n the date of filing		<b>1</b> 0-	45D
effective date is listed, the da	ite must be specific and o this block does not me	cannot be prior to date of fil cet the applicable statuto	ing or more than 90 days af	tional) for filing.) Pursuant to 605.02 first date will not be listed a
ord specifies a delayed el filed.	ffective date, but not a	an effective time, at 12:0	I a.m. on the earlier of:	(b) The 90th day after th
d DECEMBER 11	1	<u> </u>		
	THANK	MAH		

Typed or printed name of signee