## 120000367872

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## **COVER LETTER**

Div:	ision of Co			}
	HRC INTE	RNATIONAL INVESTMENT	TSILC , ' , ,	i
SUBJECT:				!
		Name of Lin	mited Liability Company	<b>-</b> ;
				1
		Amendment and fee(s) are sul	-	
Please return	all correspo	indence concerning this matter	r to the following:	  -
		JOSE RODRIGUEZ	•	<b>+</b>
			Name of Person	· ·
		INTEGRAL CONSULTIN	NG SERVICES LLC	· · · · · · · · · · · · · · · · · · ·
		L59 SW 185 WAY	Firm/Company	
•	•		Address	<del>-</del>
	-	PEMBROKE PINES, FL3	33029	- <del>-</del>
•	-	OPERATIONS@ACHIEVE	City/State and Zip Code	1
		E-mail address: (	to be used for future annual report notification)	- 1
For further inf	ornation co	oncerning this matter, please or	all:	1
JOSE RODRI	GUEZ		561 451-6330 🚉	
	Name of	Person	at () Area Code Daytime Telephone Numb	<del></del>
-:				1 .
Enclosed is a c	heek for the	following amount:	,	- <u> </u>
■ \$25.00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, rate of Status & d Copy at copy is enclosed)
Regi: Divis P.O.	ng Address: stration Scion of Co Box 6327 hassee, Fl	ection rporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite Tallahassee. FL 32303	810
			<b>\</b> • • • • •	

## **COVER LETTER**

Division of Co	rporations		i	
	ERNATIONAL INVESTMENT	rsilc .	1	
SUBJECT:			:	
	Name of Lis	mited Liability Company :	· .	
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The enclosed Articles o	f Amendment and fee(s) are su	hmitted for filing	•	
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riease return all corresp	ondence concerning this matter	to the following:		
	JOSE RODRIGUEZ		1	
	•		1	
	FLEDONINA E AMALIAN SERVICE	Name of Person		
	INTEGRAL CONSULTIN	IG SERVICES LLC	1	
	•	Firm/Company		
	159 SW 185 WAY			· · .
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,		Address		
	PEMBROKE PINES, FL3	13029	•	
• .		City/State and Zip Code -	<del></del> .	
•	OPERATIONS@ACHIEVI			I
	E-mail address:	to be used for future annual report notific	ation)	, ,
For further information a	concerning this matter, please of			
JOSE RODRIGUEZ	The state of the s	<b>5</b> 61 451-6330 <sup>-</sup>		) }
		at ( )		
Name (	of Person		Clephone Number	i
Name o	of Person		Telephone Number	l
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	he following amount:	Area Code Daytime	□ <b>\$</b> 60,00 Fa	ing Fee,
Enclosed is a check for t	he following amount:	Area Code Daytime	\$60.00 Fill     Certificate     Certified (	ing Fee,
Enclosed is a check for t	he following amount:	Area Code Daytime To S55.00 Filing Fee & Certified Copy	\$60.00 Fill     Certificate     Certified (	ing Fee,
Enclosed is a check for t	he following amount:	Area Code Daytime To S55.00 Filing Fee & Certified Copy	\$60.00 Fill     Certificate     Certified (	ing Fee,
Enclosed is a check for t	he following amount:	Area Code Daytime To S55.00 Filing Fee & Certified Copy	\$60.00 Fill     Certificate     Certified (	ing Fee,
Enclosed is a check for t  \$25.00 Filing Fee  Mailing Address	he following amount:  30,00 Filing Fee & Certificate of Status	Area Code Daytime To Street Address:	Sco.00 Fill Certificate Certificate (additional of	ing Fee,
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Enclosed is a check for to \$25,00 Filing Fee  Mailing Address Registration of Olivision of Communications and the second	be following amount:    \$30,00 Filing Fee & Certificate of Status   Certificate of Status	Area Code Daytime To Street Address: Registration Section Division of Corporation	Sco.00 Fill Certificate Certified (additional of	ing Fee,
Enclosed is a check for to \$25,00 Filing Fee  Mailing Address Registration of Open Property P	be following amount:    \$30.00 Filing Fee & Certificate of Status   Certificate of Status	Area Code Daytime To Street Address: Registration Section of Corporation of Corporation Control of Tales.	Sco.00 Fill Certificate Certified (additional of	ing Fee, e of Status & Copy copy is enclosed)
Enclosed is a check for t  \$25.00 Filing Fee  Mailing Address Registration of O	be following amount:    \$30.00 Filing Fee & Certificate of Status   Certificate of Status	Area Code Daytime To Street Address: Registration Section Division of Corporation	Sco.00 Fill Certificate Certified (additional of	ing Fee, e of Status & Copy copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HRC INTERNATIONAL INVESTME	NTS LLC			
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)		•	
The Articles of Organization for this Limited Liab Florida document number 1.20000367872	ility Company were filed on 11/20/2020	and a	assigned	
This amendment is submitted to amend the following	ing:	İ		
A. If amending name, enter the new name of the	te limited liability company here:	! :		
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation "LLC" or the	s abbreviation '	"L.L.C."	-
Enter new principal offices address, if applicable	le:			_
(Principal office address MUST BE A STREET	ADDRESS)	<u>.</u>		-
		<u>;</u>	<del></del>	-
Enter new mailing address, if applicable:		<u> </u>	20 <u>.</u>	_
(Mailing address MAY BE A POST OFFICE BO	22)		<u>,                                     </u>	_ _ ; _ ;
B. If amending the registered agent and/or registered office address h	stered office address on our records, <u>enter the n</u>	ame of the n		ered
Name of New Registered Agent:	<del></del>	12.53	2 :6 HB	المحدث ا
New Registered Office Address:		m	<u> </u>	-
	Entar Florida street addrass			-
	, Florida	1 2 6	1.	-
New Registered Agent's Signature, if changing Reg	•	' Zip Cod	E.	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper	gent and agree to act in this capacity. I further and complete performance of my duties, and I are agent as provided for in Chapter 605, F.S. Clistered office address, I hereby confirm that the	m familiar v Dr, if this do	vith and cument is	
	If Changing Registered Agent, Signature of New	Registered Ac	ent	

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>	Name	Address	Type of Action
MGR	RUIZ, HAROLD	1800 SW 25TH STREET APT 2107 MIAMI, FL 33133	<b>)x(</b> Add
	pr same:		□ Remove
* MGR	CAMPANA, MARIA	19712 DINNER KEY DRIVE, BOCA RATO	DChange N, FL 33498
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	•	!	Remove
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If the date inscrted in this block	does not meet the applic	able statutory filing requ	iir 90 days area ning. iirements, this date	will not be listed
nent's effective date on the Depar	tment of State's records	•		
				;
rd specifies a delayed effective da	te, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) Th	se 90th day after th
** *				•
iled. •				
JULY 29	2021			
JULY 29	2021		-/	
JULY 29	2021	- G. W.		
JULY 29	2021	Munitaria	um-	

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