## K21000016592

(Red	questor's Name)	
(Add	dress)	<u> </u>
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	<del>.</del>
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



900368929429



## **COVER LETTER**

TO:

	gistration Se vision of Cor			
CUDILICT.		R FINANCE LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		BEATRIZ CRUZ		
			Name of Person	
		BC ACCOUNTING LLC		
		<del></del>	Firm/Company	
		1150 NW 72 AVE SUITE	425	
			Address	
		MIAMI, FL 33126		
			City/State and Zip Code	
		BEATRIZ@BC-ACCOUN		<del></del>
For further i	nformation c	e-mail address: (	to be used for future annual report noti- all:	neation)
BEATRIZ (	CRUZ		786 444-5044	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ma Re	niling Addres gistration S	<u>s:</u> Section	Street Address: Registration Sec	ction
Di	vision of C	orporations	Division of Cor	porations
	O. Box 632 Ilahassee, f		The Centre of T 2415 N. Monro	allanassee c Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVERMOR FINANCE LLC	
(Name of the Limited Liability Company as it r (A Florida Limited Liability Company)	ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fi Florida document number    L21000016592	led on 01/07/2021 and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	pany," 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)	
	Fair Control of the C
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, enter the name of the new registers
<del></del>	Ç
Name of New Registered Agent:	<u> </u>
<del></del>	<u>:</u>
New Registered Office Address:	Enter Florida street address C11
	جن المناطقة
Cit	

## 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
MGR	BEATRIZ CRUZ		□Add
		1150 NW 72 AVE SUITE 425 MIAMI, FL 33126	≣Remove
		· · · · · · · · · · · · · · · · · · ·	GChange
MGR MARIA CLAUDIA PENA	MARIA CLAUDIA PENA	1150 NW 72 AVE SUITE 425 MIAMI, FL 33126	■Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		<del> </del>	□Add
			□Remove
			Change
			□Add
			□Remove
			Change

•	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
f an el <mark>Note:</mark>	tive date, if other than the date of filing:
reco d is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
)ated	06/21/2021
	Min
	Signature of a member or authorized representative of a member
	Maria Claudia Peng

.

.

Filing Fee: \$25.00