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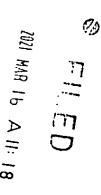
| (Re                     | questor's Name)   |           |
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| PICK-UP                 | TIAW [            | MAIL      |
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| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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## **COVER LETTER**

|                              | tion Section<br>of Corporations  |                                    |  |  |   |
|------------------------------|--|------------------------------------|--|--|---|
|                              | I PARK INVESTM   | IENTS LLC                          |  |  |   |
| SUBJECT:                     |  | Name of Lim                        | ited Liability Company   | · <del>, , , , , , , , , , , , , , , , , , ,</del> |   |
| The enclosed Arti            | cles of Amendmen   | t and fee(s) are sub               | mitted for filing.   |  |   |
| Please return all c          | orrespondence con  | cerning this matter                | to the following:  |  |   |
|                              | MARIA  | A.L. LOPEZ                         |  |  |   |
|                              |  |                                    | Name of Person   |  |   |
|                              | SINI PA  | ARK INVESTMEN                      | ITS LLC  |  |   |
|                              |  |                                    | Firm/Company   | -  |   |
|                              | 3036 E   | LIZABETH STRE                      | Eľ   |  |   |
|                              |  |                                    | Address  |  |   |
|                              | COCO   | NUT GROVE, FL.                     | 33133  |  |   |
|                              |  |                                    | City/State and Zip Code  |  |   |
|                              | LORELO   | OP@ HOTMAIL.C  E-mail address: (   | to be used for future annual repo                                  | ort notification)                                  |   |
| For further inform           | nation concerning t  |                                    |  |  |   |
| MARIA LOREN                  | A LOPEZ  |                                    | 786 346-80   | 98   |   |
|                              | Name of Person   | <u> </u>                           | at () 1  | Daytime Telephone Number                           |   |
| Enclosed is a che            | ck for the following   | g amount:                          |  |  |   |
| ■ \$25.00 Filing             |  | 00 Filing Fee & tificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | d) Certified                                       | ling Fee. te of Status & PS Copy Stopy is enclosed) |
| Registi<br>Divisio<br>P.O. B | Address:<br>ration Section<br>on of Corporatio<br>ox 6327<br>assee, FL 32314 |                                    | The Centro<br>2415 N. M  |  | ED 711.18   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SINI PARK INVESTMENTS LLC  |   |   |   |                                |                                |
|--|---|---|---|--------------------------------|--------------------------------|
| (Name of the Limited<br>(A   | Liability Compan<br>A Florida Limited Li                            | y as it now appears (<br>ability Company) | n our records.)                                 |                                |                                |
| The Articles of Organization for this Limited Liab Florida document number $\frac{1.21000023719}{1.000023719}$   |   | were filed on JANU                        | JARY 26, 2021                                   | and assign                     | ed                             |
| This amendment is submitted to amend the follow  | ving:   |   |   |                                |                                |
| A. If amending name, enter the new name of t   | he limited liabil   | lity company here                         | ;   |                                |                                |
| The new name must be distinguishable and contain the wor   | rds "Limited Liabili  | ty Company," the desi                     | gnation "LLC" or the abbi                       | reviation "L.L.C               |                                |
| Enter new principal offices address, if applicat   | ble:  |   |   |                                |                                |
| (Principal office address MUST BE A STREET   | ADDRESS)  |   |   |                                | <del></del>                    |
|  |   |   |   |                                |                                |
| Enter new mailing address, if applicable:  |   |   |   |                                |                                |
| (Mailing address MAY BE A P <u>OST OFFICE B</u>  | 010   |   |   |                                |                                |
| maning dadress MAT BE A LOST OF FICE BY  | <u>(7.1)</u>  | -   |   |                                | <del></del>                    |
| B. If amending the registered agent and/or regagent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address:  |   | ddress on our rec                         | ords, <u>enter the name</u>                     | of the new ro                  | egistered                      |
|  |   | Enter Florid                              | a street address                                | <del></del> -                  |                                |
|  |   |   | , Florida                                       | 2021                           | · (29                          |
|  | •   | City                                      | Florida   | Zip Code                       | רי                             |
| New Registered Agent's Signature, if changing Re   | egistered Agent:  |   |   |                                |                                |
| I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the company has been notified in th | r and complete <sub>i</sub><br>tered agent as p<br>egistered office | performance of m<br>rovided for in Ch     | ly duties, and Lam fa<br>capter 605, F.S. Or, i | unitiar with i<br>f dais docum | u <b>i</b> d<br><b>9</b> 11 is |
|  |   |   |   |                                |                                |

If Changing Registered Agent, Signature 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 |
|--------------|----------------------------|-----------------------------|----------------|
| MGR          | Rodrigo Barrios Echeverria | 10031 Pines Blvd, Suite 228 | <b>=</b> Add   |
|              |                            | Pembroke Pines, Fl 33024    | □Remove        |
| ,            |                            |                             |                |
|              |                            |                             |                |
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|                                      |   |  |                    |  | T-   | <del>-</del>                            | _                     |
|                                      | han the date of   |  |                    |  | 75 Th  |   | _                     |
| e date is listed, the date inserted  | han the date of<br>e date must be speci<br>in this block does<br>on the Departmer | fic and cannot be p<br>not meet the ap | plicable statutory | g or more than 90<br>y filing requirem | (optional)<br>days after filing.)<br>ents, this date w | Pursuant to (<br>/ill not be l          | 605,0207<br>listed as |
| cord specifies a delayed<br>s filed. | l effective date, b   | ut not an effectiv                     | e time, at 12:01   | a.m. on the earl                       | ier of: (b) The  | 90th day a                              | fter the              |
| ed MARCH II                          |   | · 202/                                 | -f./               |  |  |   |                       |
|                                      |   | And the second                         |                    |  |  |   |                       |

Filing Fee: \$25.00