# L210 0063624

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(City/State/Zip/Phone #)	
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## **COVER LETTER**

TO: Registration Sec Division of Corp			
-	nchez Mont	Talvo Investm	ents, LLC
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Ivonne	Montalvo-To	namirez
		Firm/Company	(i) N
	1350 Ma	ywood Ave	NO FAY
	Deltona,	FI 32725 City/State and Zip Code	O #
	Ivonnemo	City/State and Zip Code  - 1970 O yahoo  to be used for future annual report notif	).Com
	oncerning this matter, please c		
Ivonne Mo	ontalvo-Ram	$\frac{1000}{1000}$ at $\frac{380}{1000}$ $\frac{215}{1000}$	5771 Telephone Number
Enclosed is a check for the	e following amount:		
Se \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	:	Street Address:	

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

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

(Name of the Limited Liability Compan (A Florida Limited Li The Articles of Organization for this Limited Liability Company v	malasiana
Florida document number <u>L210006362</u> 4	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil.  Montalvo - Ramirez  The new name must be distinguishable and contain the words "Limited Liability".	Investments, LLC
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)	T2 2
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

## 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.

City

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
PRES	Winfred Sanchez	1350 Maywood Ave	□ Add
		Deltona, Fl 82725	Remove
	•		□Change
PRES	Ivonne Montalvo Ramin	rez 1350 Maywood Ave Deltona, Fl 3272:	□ Add
	•	Deltona, F1 3272	_ □Remove
			Change
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Typed or printed name of signee