## 121000063624

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2021 DEC -6 PM 6: 44
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

MONTALVO-RAMIREZ INVESTMENTS, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: IVONNE MONTALVO-RAMIREZ Name of Person Firm/Company 1350 MAYWOOD AVE Address DELTONA, FL 32725 City/State and Zip Code WINIVOINVESTMENTS@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: IVONNE MONTALVO-RAMIREZ Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, ☐ \$55.00 Filing Fee & **≅** \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ... TO FILED ARTICLES OF ORGANIZATION OF

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MONTALVO-RAMIREZ INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.) SSEE, FLEREY OF STATE (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	Company were filed on 05/18/2021	and assigned
Florida document number <u>L21000063624</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
SANCHEZ MONTALVO INVESTMENTS, LLC		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	d to amend the following:  It the new name of the limited liability company here:  VESTMENTS, LLC  Table and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL.  address, if applicable:  UST BE A STREET ADDRESS)  It applicable:  A POST OFFICE BOX)  Ted agent and/or registered office address on our records, enter the name of the new elected Agent:  Stered Agent:  Stered Agent:	
	City	Zip Code

## 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
PRES	WINFRED SANCHEZ	1350 MAYWOOD AVE	<b>=</b> Add
		DELTONA, FL 32725	□Remove
			□Change
VP Ivonne Montalvo-Ramirez	1350 MAYWOOD AVE	□Add	
		DELTONA, FL 32725	Remove
			<b>=</b> Change
			□Add
			□ Remove
			Change
		Remove	
			□Change
			□Add
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			□Change
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in effec <u>ote:</u> If	date, if other than the date of filing:	0207 d as
ecord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
ited _	NOVEMBER 29 2021	
	Signature of a member or authorized representative of a member	
	IVONNE MONTALVO-RAMIREZ	
	Typed or printed name of signee	