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	gistration Se vision of Cor			
SUBJECT:		EAM INVESTMENTS LLC		
SOBJECT.		Name of Lin	nited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	,
Please retur	n all correspo	indence concerning this matter	to the following:	
		Rodrigo Zuloaga		
			Name of Person	
		BROWN TEAM INVEST	MENTS LLC	
			Firm/Company	·
		560 Village Blvd Suite 28	0	
			Address	
		West Palm Beach / FL 334	409	
			City/State and Zip Code	
		rzuloaga@thegreenshape.co		
		E-mail address: (to be used for future annual report not	tification)
For further:	information c	oncerning this matter, please c	all:	
Rodrigo Zu	loaga		561 9894070 at ()	
	Nате о	f Person		ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$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)
Re Di P.0	gistration S vision of C D. Box 632 Ilahassee, F	Section orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BROWN TEAM INVESTMENTS LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 02/26/2021	and assigned
Florida document number L21000096101		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u>. </u>	
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		21 JUL -5
 If amending the registered agent and/or registered off agent and/or the new registered office address here: 	ice address on our records, <u>enter th</u>	e name of the new-registe
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	Flori	da
	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 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	Alfonso Machado	560 Village Blvd Suite 280	
		West Palm Beach, FL 33409	■Remove
			□Change
MGR	Rodrigo Zuloaga	560 Village Blvd Suite 280	■Add
		West Palm Beach, FL 33409	□ Remove
			□Change
MGR	Eduardo Sacco	560 Village Blvd Suite 280	
		West Palm Beach, FL 33409	□Remove
			□Change
			□ Add
			□Remove
			Change
			
			□Remove
			Change
			□Add
			□Remove
			Change

	
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Note: If the date inserted in t	the date of filing:
e record specifies a delayed ef rd is filed.	fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
July 31st,	2024
	1 min
	Signature of a member or authorized representative of a member
Rodrigo Zuloaga	

Filing Fee: \$25.00