LZ1000 170958

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL :
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

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end in en	-	oque Investments, LLC		•
SUBJECT	;	Name of Lim	nited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retur	m all correspo	ondence concerning this matter	to the following:	
		Orlando Roque		
			Name of Person	
		Roque & Roque Investmen	nts, LC	
			Firm/Company	
		7751 W. 2th Ave #6		
			Address	
	Hialeah, FL 33016			
			City/State and Zip Code	
		orly2185@yahoo.com		TORK TOR A
For further	information c	E-mail address: to oncerning this matter, please e	to be used for future annual report nall:	otrication)
Orlando Ro	oque		786 804-2121	
	Name o	f Person	Area Code Dayt	inte Telephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00	Filing Fee	S30.00 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)
	ailing Addres		Street Address: Registration S	Section
Registration Section Division of Corporations		-	Division of Corporations	
	O. Box 632		The Centre of	
10	allahassee, l	rL 54514	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Roque & Roque Investments., LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{04/13/2021}{1}$ and assigned Florida document number __L21000170958 This 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" 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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>	Name	Address	Type of Action
AMBR	Orlando Roque	8180 NW 183rd Street Hialeah, FL 33015	= Add
			□Remove
			□Change
			□Add
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			□Remove \
		***************************************	DChange
			□Add
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If amo	nding any other information, enter change(s) here: (Attach additional sheets, if neces.	sary.)
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(If an eff - <u>Note:</u>	ve date, if other than the date of filing: (option ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fill the date inserted in this block does not meet the applicable statutory filing requirements, this cent's effective date on the Department of State's records.	ling.) Pursuant to 605,0207 (3
ne recor ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) ed.	The 90th day after the
Dated	· · · · · · · · · · · · · · · · · · ·	707
	Signature of a meruber or authorized representative of a member	

Filing Fee: \$25.00