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(Red	questor's Name)	
(Add	iress)	
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COVER LETTER

TO:

Registration Section

Division of Co	rporations			
	UR INVESTMENT INTERNA	TIONAL LLC		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	-		
·	•	C		
	CARLOS BISIO			
		Name of Person		
	FASTFORWARD TRAD	ING COMPANY LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·	
	1845 NW 112 TH AVEN	JE STE 203, MIAMI FLORIDA		
		Address		
	33172			
		City/State and Zip Code		
·	info@fastfwdus.com E-mail address: (to be used for future annual report not	ification)	
For further information of	oncerning this matter, please c	all:		
CARLOS BISIO		786 4956610		
Name o	of Person	at ()	ne Telephone Number	
Enclosed is a check for the	he 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)	
Mailing Addres Registration S		Street Address: Registration Se	ection	
Division of C	Corporations	Division of Cor	Division of Corporations	
P.O. Box 632 Tallahassee, 1		The Centre of 1 2415 N. Monro	Fallahassee be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MERCOSUR INVESTMENT INTERNATIONAL 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 04/30/2021	and assigned
Florida document number 1.21000201347		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or th	e 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 a agent and/or the new registered office address here: Name of New Registered Agent:		
<u> </u>		
New Registered Office Address:	Enter Florida street address	
		<u> </u>
	, Florida	
New Designation of American Designation of the second Second Second	City	Zip Codes
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree		20
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I a provided for in Chapter 605, F.S. (m famillar भी hand । Or. if this damment is
company has been notified in writing of this change.		n¦ ω
If Chan	ging 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	OBDULIO C CARNE FUNES	1845 NW 112TH AVENUE STE 203	□Add
		MIAMI, FLORIDA 33172	_
		·	■Change
			□ Add
			□Remove
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(If an eff Note;	tive date, if other than the date of filing: _ ffective date is listed, the date must be specific and can	(optional) unot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(the applicable statutory filing requirements, this date will not be listed as the s's records.
he recor ord is fi		effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	NOVEMBER 29 2	021
Dated	R.D.	
	" art of which	6 1 N

Typed or printed name of signee