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COVER LETTER

	Registration Sec Division of Corp			
SUBJEC		NVESTMENTS LLC		
SUBJEC		Name of Limi	ted Liability Company	
The enclo	osed Articles of a	Amendment and fee(s) are subr	nitted for filing.	
Please re	turn all correspon	ndence concerning this matter t	o the following:	
		CHARMAGNE CHAPPEL	ı.	
			Name of Person	
		BARAKA INVESTMENT	S LLC	
			Firm/Company	
		333 6TH ST SW		
			Address	
		WINTER HAVEN FL 3388	80	
			City/State and Zip Code	
		orlampahomes@gmail.com		
		E-mail address: (t	o be used for future annual report notif	ication)
For furth	er information co	oncerning this matter, please ca	H:	
Charmag	gne Chappell		863 206-4000 at ()	
	Name of	Person	at () Area Code Daytimo	: Telephone Number
Enclosed	l is a check for th	e following amount:		
■ \$25.0	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:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#21 SEP 30 AH 6: 27

BARAKA INVESTMENTS LLC (Name of the Limited Liability Company as it now appears on our records.) a
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 11th, 2021 and assigned Florida document number L21000219928 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

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.

__, Florida ___

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>	<u>Address</u>	Mil SEP 39	AN 6:27	Type of Action
MGR	Evelyn Davis		·	- 1 ·	□Add
		546 Patton Loo	p Bartow, Fl. 33830		= Remove
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ative data if other than the de	9/20/21 (optional)
effective date is listed, the date must be	e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.
2: If the date inserted in this block iment's effective date on the Depa	c does not meet the applicable statutory filing requirements, this date will not be liste artment of State's records.
ord specifies a delayed effective datiled.	late, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after
September 20	2021
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	gnature of a member or authorized representative of a member