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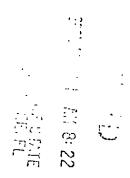
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(Business Entity Name)
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08/21/24

COVER LETTER

TO:

Registration Section

Division of C	orporations		
Alpha In	novations - Investments LLC		
SUBJECT:	Name of L	mited Liability Company	<u> </u>
The enclosed Articles of	of Amendment and fee(s) are su	ibmitted for filing.	
Please return all corres	oondence concerning this matte	er to the following:	
	Daniel Bottino		
		Name of Person	
	Alpha Innovations - Inve	stments LLC	
		Firm/Company	: }
	1330 Adair rd		<u>.</u>
		Address	
	Davenport FI 33837		
	-	City/State and Zip Code	يو وگور ا`أأ
	danielabottino@gmail.com		프로 N
		(to be used for future annual report not	ification)
For further information	concerning this matter, please o	call:	
Daniel Bottino		786 5377285	
Name of Person			ne Telephone Number
Enclosed is a check for t	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 Address Registration 9 Division of C P.O. Box 632 Tallahassee, 1	Section corporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroc	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alpha Innovations - Investments LLC			
(Name of the Limited Liability (A Florida)	Company as it now appears on our rec Limited Liability Company)	cords.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 5/24/2021		_ and assigned
Florida document number 1.21000240833	<u>-</u>		<u>.</u>
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
Alpha Innovations - Investments and Services LLC			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "I	LC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office uddress MUST BE A STREET ADDRE	ESS)		
			•
		,	• ;
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		ple:	~ 1- ·
		귀고	2
		[i]	10
 If amending the registered agent and/or registered of gent and/or the new registered office address here: 	office address on our records, <u>ent</u>	er the name of	the new regist
the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:		- W	,
	Enter Florida street addr	ress	<u> </u>
		Florida	
	City		ip 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	Ivan Bottino	1330 Adair rd. Davenport, FL. 33837	■Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be protective. If the date inserted in this block does not meet the approximent's effective date on the Department of State's recommendation.	olicable statu	filing or more the	one OO down all	ional) er filing.) Pu is date wil	irsuant to I not be	605.020 listed a
record specifies a delayed effective date, but not an effectivise filed.	re time, at 12	:01 a.m. on th	e earlier of: (b) The 9	0th day	after the
	// /	,				
ated August 11th , 2024						
August 11th 2024 Signature of a number of a	uthorized					_

Filing Fee: \$25.00