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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #)	
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COVER LETTER

TO: Registration So Division of Con			•		
All About	Investments Group, L.L.C	·		•	
SUBJECT:	Name of Lim	ited Liability Company		*	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Aramis Cepero				
		Name of Person			
	All About Investments Gre	oup, L.L.C			
		Firm/Company			
	1475 West 46th Street, Ap	1 523			
		Address			
	Hialeah, FL 33012			نہ ہے	
	Florida.usa2@gmail.com	City/State and Zip Code		2021 JUL 28 5 TALL 2115	~ 1
	_	to be used for future annual report notif	fication)	1 2	
For further information o	concerning this matter, please c	all:		8 7	`
Aramis Cepero		786 295-0916 at ()		PH 16 1-8	
Name (of Person	Area Code Daytim	e Telephone Number	· ∞	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status				
Mailing Address Registration	Section	Street Address: Registration Sec			
Division of C	lorporations	Division of Cor	porations		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(AF	iability Company as it now appears on our records.) Iorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number L21000304719		and assigned
This amendment is submitted to amend the following	วดี:	
A. If amending name, enter the new name of the	e 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	y:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOY	<u> </u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address ho		me of the new register
Name of New Registered Agent:		2921 JU
		
New Registered Office Address:		<u> </u>
New Registered Office Address:	Enter Florida street address . Florid a	20 PH

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>	<u>Name</u>	Address	Type of Action
MGR	Aramis Cepero	1475 West 46th Street, Apr 523 -Hialeah, FL 33012	= Add
			□Remove
			□Change
AMBR	Aramis Cepero	1475 West 46th Street, Apt 523 - Hialeah, FL 33012	= Add
		·	□Remove
			□ Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
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ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the De	be specific and ck does not n	f cannot be prior neet the applic	able statutory	or more than 90 days	o ptional) after filing.) Purst s, this date will n	iant to 605.020 ot be listed a
record specifies a delayed effective Lis filed.	date, but not	an effective t	ime, at 12:01 a	.m. on the earlier o	of: (b) The 90th	i day after the
ated July 26		2021				
// ₂			orized represent			