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To:

Division of Corporations

Fax Number : (859)617-6383

From:

Account Name : SANCHEZ VADILLO LLP

Account Number : I20150000038 Phone : (305)485-9700

Fax Number : (813)492-8840

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

INVESTEX CORAL 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 $\frac{08/02/2021}{1}$ Florida document number L21000345991 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>	<u>Name</u>	Address	Type of Action
MGR	KATAT, NOUMAN	6513 NW 112th place	≅ Add
		Doral , FL 33178	□Remove
			Change
MGR	HAMMANI, WILLIAM R	11257 NW 62nd terrace	
		Doral, FL 33178	□Remove
			□Change
			□Add
			□Change
	-		□Add
			CRemove
			□Add
			□Remove
			□Change
			□Add
			□Remove
		*	☐Change

). If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessa	ry.)		
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If the record sp record is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day ar		
Dated Oct	2021 .	RETARY	2021 OCT 12	<u>                                     </u>
	Signature of a member or authorized representative of a member	E S		LED
	Xiomara Polanco, Authorized Representative	TATE ORID,	PM 2: 08	
	Typed or printed name of signee	7	•	

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