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(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
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COVER LETTER

TO: Registration Division of C	a Section Corporations			
	Investments LLC			
SUBJECT:	Name of Lim	ited Liability Company	-	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
	spondence concerning this matter			
	Daniel Vasquez			
		Name of Person	_	
	Vamos Investments LLC			
Firm/Company				
53 NW 24 Court				
Address				
	Miami, FL 33125			
		City/State and Zip Code	_	
	vamosinvestmentsllc@gma	il.com (to be used for future annual report notification)	202	
For further information	on concerning this matter, please c		2021 SEP 2 S TALLAH	
Gladys Downs		786 838-3755	$\frac{\partial}{\partial x}$ ω	; ;
Nan	ne of Person	Area Code Daytime Telephone Numb	AK 7: 29	i mang
Enclosed is a check for	or the following amount:		, —	
■ \$25.00 Filing Fee	e ☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)	
Mailing Ado Registratio Division o P.O. Box (on Section f Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee. FL,32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ppears on our records.) any)			
n <u>8/5/2021</u> and assigne			
ny here:			
the designation "LLC" or the abbreviation "L.L.C."			
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our records, <u>enter the name of the new re</u>			
r Florida street address			
Dates 1 the and an elementa			
, Florida Zip 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 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>	Type of Action
MGR	Gladys Downs		
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ective date, if other than the date of fili effective date is listed, the date must be specific as	and cannot be prior to	date of filing or me	ore than 90 days after	r filing,) Pui	rsuant to (505.020
te: If the date inserted in this block does not cument's effective date on the Department of		ie statutory ming	, requirements, th	is date with	not be i	isted a
cord specifies a delayed effective date, but no s filed.	ot an effective time	e, at 12:01 a.m. o	n the earlier of: (b) The 90)th day a:	fter the
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ed 9/15/21	_·	.•				
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Gladys Signature of a	Downe					