人21000355327

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)
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(Business Entity Name)
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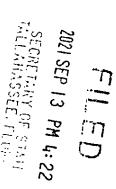
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COVER LETTER

	Registration S Division of Co			
SUBJEC		AY INVESTMENTS LLC		
SUBJEC		Name of Lir	nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	r to the following:	
		FRANCISCO X. BAY		
		-	Name of Person	
		ANCORBAY INVESTM	ENTS LLC	
			Firm/Company	
		3874 TREE TOP DR		
			Address	
		WESTON FL 33332		
			City/State and Zip Code	
		INFO@MORAVELL.COM	Л	
			to be used for future annual report not	ification)
For further	r information c	oncerning this matter, please c	all:	
FRANCIS	SCO X. BAY		954 7086933	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed i	s a check for th	ne following amount:		
\$25.00	Filing Fee	S30.00 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)
	<u>lailing Addres</u> egistration S		Street Address: Registration Sec	ction
D	ivision of C	orporations	Division of Cor	porations
	.O. Box 632 allahassee, F		The Centre of T	
1 -	ananassee, r	L 34314	2415 N. Monro	c Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP 13 PM 4: 22

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(Name of the Limited Liability Company as it now appears on our records) (ASSEL, 1997)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 08/06/2021	and assigned
Florida document number L21000355327		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applicable:	5926 NW 113TH PLACE	
(Principal office address MUST BE A STREET ADDRESS)	DORAL FL 33178	
Enter new mailing address, if applicable:	5926 NW 113TH PLACE	
(Mailing address MAY BE A POST OFFICE BOX)	DORAL FL 33178	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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>	Address	Type of Action
			□Add
			□Remove
			□Change
			🗀 Add
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ective date, if other than the effective date is listed, the date muse. If the date inserted in this blument's effective date on the D	ock does not meet t	he applicable st	of filing or more tha atutory filing requ	(optional) n 90 days after filing irements, this date) Pursuant to 605,020 will not be listed a
cord specifies a delayed effectiv i filed.	e date, but not an el	ffective time, at	12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
ed	20	21			
		/			
	Signature of a menth	\			

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