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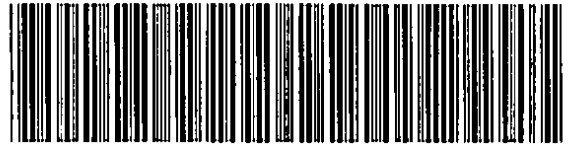
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SEC. OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Flores Pol Investment LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adyari Avila
Name of Person

Flores Pol Investment LLC
Firm/Company

936 SW 1st Ave. #990
Address

Miami FL 33130-4520
City/State and Zip Code

adyarimorales@yahoo.es
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adyari Avila at (786) 343-8837
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Flores Pol Investment LLC

If Changing Registered Agent, Signature of New Registered Agent

Or, if the document is limited liability

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

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11/11/2021 (optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated November 11, 2021

Adrie Anna

Adlyzri Avila

Typed or printed name of signee