L21000511262

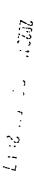
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S. ROBERTS
MAY 1 2 2023

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT: HR. &	FELIZ INVESTMEN	ЛS LLC.	
11124	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANTO	Name of Person	
		Name of Person Z INVESTMENTS Firm/Company	LLC.
	20229 NW.	Address	.
	MIAM, GAR	City/State and Zip Code	<u>56</u>
For further information c	E-mail address: (to oncerning this matter, please ca	9 1 @ GMAIL . COM to be used for future annual report note till:	fication)
Antoni'O Name o	F E GZ r Person	at (<u>486</u>) <u>975</u> Area Code Daytim	3 - /// 3 te Telephone Number
Enclosed is a check for th	ne following amount:		
X \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S	Section	Street Address: Registration Se	
Division of C P.O. Box 632	-	Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HRAFELIZ INVESTMENTS LL	'C .
HREFELIZ INVESTMENTS LL (Name of the Limited Liability Company as it now a (A Florida Limited Liability Compa	ppears on our records.) my)
The Articles of Organization for this Limited Liability Company were filed of Florida document number $\frac{L21000511262}{L}$.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar FELIZ ROJAS INVESTMENTS LLC, The new name must be distinguishable and contain the words "Limited Liability Company."	
The new name must be distinguishable and contain the words "Limited Liability Company."	the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	263
	<u> </u>
Enter new mailing address, if applicable:	7
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	2:
B. If amending the registered agent and/or registered office address on o agent and/or the new registered office address here:	ur records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter	Florida street address
	Florida Zip Code
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>	Name	Address	Type of Action
			□Add
		□Remove	
		 -	☐ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
		_	□Change
			🗖 Add
			□Remove
			□Change
			□Add
			□Remove
		□Change	
			□Remove
			□ Change

, it aim	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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Note:	ive date, if other than the date of filing:
the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	
	At - Alien
	Signature of a member or authorized representative of a member
	Atom A tol. 7
	Awton, 0 FeliZ Typed or printed name of signee

Filing Fee: \$25.00