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T. MATTHEWS FEB - 1 2022

COVER LETTER

	Registration Se Division of Co			
cup u.c		Investment LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	·
The encl	osed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Carlos A Disla		
			Name of Person	
		A-MIGOS Investment LLG	C	
		•	Firm/Company	
		4899 sable pine circle Apt	B2	
			Address	
		West Palm Beach, FL 334	17	
			City/State and Zip Code	·
		Amigosinvestmentlle@gma		
		E-mail address: (to be used for future annual report no	tification)
For furth	er information o	concerning this matter, please c	all:	
Carlos A	Disla		401 301-6471 at ()	
******	Name o	f Person		me Telephone Number
Enclosed	is a check for t	he following amount:		
□ \$ 25.0	00 Filing Fee	■ \$30.00 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)
	Mailing Addres Registration (Street Address: Registration So	ection
	Division of C	•	Division of Co	orporations
	P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 2. TO THE TOTAL SECTION 2. TO THE SECTION 2. TO THE

A- MIGOS Investment LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 12/28/2021	and assigned
Florida document number L2200005374		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
N/A		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered	d office address on our records, enter th	e name of the new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
There in Control of the Auditors.	Enter Florida street address	
	T21 5	٠
	, FIOTI	daZip 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
MGR	Pedro Maria Lora Almanzar	Benito Juarez #9	= Add
		Santo Domingo, Distrito Nacional	
		Dominican Republic	□Change
	<u> </u>		□ Add
			□Remove
			☐Change
			□Add
			□Remove
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~			
			□Remove
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			□Remove
			□Add
		11-11-11-11-11-11-11-11-11-11-11-11-11-	□Remove

□ Change

Effective date, if other than the date of filing: 10/107/2022 [(optional)] I an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 American filing is requirements, this date will not be listed as document's effective date on the Department of State's records. The effective date on the Department of State's records. The effective date on the Department of State is records. The effective date on the Department of State is records. The effective date will not be listed as document's effective date, but not an effective time, at 12:01 a.m. on the earlier of: (h) The 90th day after the dis filed. Dated Sugnature of a forember obsurborized representative of a member CARIOS A Dis A	., .	her information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: O1/07/2022		
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Signature of a member or-authorized representative of a member		CHU D D SH
		Signature of a member obtained representative of a member