L22000023834

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	(City/State/Zip/Phone #)	
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COVER LETTER

TO:

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SUBJECT:	MAROUB	RA INVESTMENTS, LLC			
SUBJECT.		Name of Lin	nited Liability Company	-	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please returi	i all correspo	ondence concerning this matter	to the following:		
		DORCAS TROCHE			
		<u></u>	Name of Person		
		RCG ACCOUNTING & A	ASSOCIATES, INC.		
			Firm/Company		
		9000 SHERIDAN STREE	ET SUITE 138		
			Address		
		PEMBROKE PINES, FL	33024		
			City/State and Zip Code	-	<u> </u>
		DORCAS@RCGACCOUN			
For Comb :	- C		to be used for future annual re	eport notification)	
ror turtner i	ntormation c	oncerning this matter, please c	all:		
DORCAS T	ROCHE		954 862 at ()	-2222	
	Name of	Person	Area Code	Daytime Telepho	one Number
Enclosed is a	check for th	e following amount:			
■ \$25.00 F	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)
Reg Div	iling Address gistration S vision of Co). Box 632'	ection orporations	Division	dress: tion Section of Corporatio tre of Tallahas	
	lahassee, F			tre of Tallanas Monroe Street	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAROUBRA INVESTMENTS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JANUARY 11, 2022 and assigned Florida document number L22000023834 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Cin

, Florida _

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	ELSA P. WILCHES MCNULTY	1381 NW 144TH AVENUE	= Add
		PEMBROKE PINES, FL 33028	□Remove
			□Change
			□Add
		-	□Remove
			🗆 Change
			□Add
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ecord specifies a	ı delayed eff	ective date	, but not a	ın effectiv	re time, a	12:01 a.i	m. on the	earlier of	(b) Th	e 90th day	after the
FEBRUAR	Y 17		·	2022							
/S/CE	SAR MOI	_INA GA	LAVIS								
		Signat	ure of a m	ember or a	uthorized	epresentat	ive of a m	ember	_		_

Filing Fee: \$25.00