L22000052824

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A. BUTLER MAR 2 1 2022

COVER LETTER

Registration Section
Division of Corporations

TO:

XTA INV SUBJECT:	ESTMENTS LLC				
SUBJECT:	Name of Lim	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:			
	ANDRES HURTADO				
	 	Name of Person			
	PRODEZK INC				
		Firm/Company			
	848 BRICKELL AVE STI	E 950			
		Address	.		
	MIAMI, FL 33131				
		City/State and Zip Code			
	INFO@PRODEZK.COM				
	E-mail address: (to be used for future annual report noti	fication)		
For further information of	oncerning this matter, please c	all:			
ANDRES HURTADO		+1 786 977 94 at ()	21		
Name o	f Person		e Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 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)		
<u>Mailing Addres</u> Registration S		Street Address: Registration Se	ction		
Division of Corporations		•	Division of Corporations		
P.O. Box 632		The Centre of T			
Tallahassee, l	プレ 32314	2415 N. Monro	e Street Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

FILED 2022 MAR -8 PM 2: 37

XTA INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

(****ional billing		ASSEE, FILE		
The Articles of Organization for this Limited Liability Company	were filed on 01/31/2022	and assigned		
Florida document number 1.22000052824				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	19301 W DIXIE HWY #2615			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33180			
Enter new mailing address, if applicable:	19301 W DIXIE HWY #2615			
Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33180			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new regis		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, Floric	la		

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>	<u>Address</u>	Type of Action
MGR	GERARDO LOAIZA CASTANO	19301 W DIXIE HWY #2615	
		MIAMI, FL 33180	□Remove
MGR	LINA M ARCIA ARIAS	19301 W DIXIE HWY #2615	
		MIAMI, FL 33180	_
			□ Add
			Remove
			□ Change
			□Add
			□Remove
			□Change
			
			□Change
			□Remove
			□Change

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ocumen	it's effective date	on the Departm	ent of State's r	ecords.	idiory minigre	quirements, tins	date will flot be its	icu as
record s	specifies a delaye	effective date,	but not an effe	ctive time, at 1	2:01 a.m. on t	he earlier of: (b)	The 90th day aft	er the
is filed	l.							
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