## L22000070410

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T. MATTHEWS MAR 14 2022

## COVER LETTER

	stration Se sion of Cor		•	•
		ARO INVESTMENTS LLC /	AMENDMENT FOR ADDITIO	N OF OFFICER
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return a	all correspo	ndence concerning this matter	to the following:	
		JUSTIN FINOCCHIARO		
			Name of Person	
		FINOCCHIARO INVEST	MENTS	
			Firm/Company	
		3551 SW 23 TERRACE		
		<u></u>	Address	<del></del>
		MIAMI, FL 33145		
			City/State and Zip Code	-
		JUSTINFINOCCHIARO@	GMAHCOM	
		E-mail address; (	to be used for future annual report n	otification)
For further inf	ormation co	oncerning this matter, please c	all:	
JUSTIN FING	OCCHIAR	)	786 300-8251	
	Name of	Person	at () Area Code Dayı	ime Telephone Number
Enclosed is a c	check for th	e following amount:		
■ \$25.00 Fil	ling 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
	ing Addres		Street Address:	
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	Box 632		Division of C The Centre of	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Diability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L22000070410	were filed on 2/10/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company." the designation "LLC" or the ab	breviation "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 a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter the nam</u>	e of the new register

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

FINOCCHIARO INVESTMENTS LLC

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, 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>	<u>Name</u>	Address	Type of Action
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(If an e: <u>Note:</u>	tive date, if other than the feetive date is listed, the date must. If the date inserted in this bluent's effective date on the D	date of filing: t be specific and cannot be ock does not meet the a	upplicable statutory fili	ing requirements, this o	ling.) Pursuant to 605.0207 (3 late will not be listed as the
f the reco record is f	ord specifies a delayed effectiv îled.	e date, but not an effect	tive time, at 12:01 a.m	. on the earlier of: (b)	The 90th day after the
Dated	FEBRUARY 23	2022	A//		
		V 1	. 11 11 11	11 11 11 .	

Typed or printed name of signee