08795

(Red	questor's Name)	
(Add	dress)	
- (Add	dress)	
(100)	11033)	
	-	
(Cit	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	me)
(==		,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
	C T O T ·	
Special Instructions to	Filing Officer:	

Office Use Only



000386005650

04/20/22--01019--019 **25.00

A RAMSEY APR 2 1 2022 2022 APR 20 PM 2: 45 RECEIVED

FILED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

WILLKENSOL IN	VESTMENT	S LLC	
 			
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
8/			Vehicle Search
			Driving Record
Requested by:			UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In		Jp	Courier

COVER LETTER

то:				
en n		SOL INVESTMENTS LLC		
SUBJI	rc1:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		CARLOS ANDRES MOR	A DIAZ	
			Name of Person	
		SOFT LANDING US, LLG	C	
			Firm/Company	
		777 SW 37th Ave STE 510)	
			Address	
		Miami, FL 33135, Estados	Unidos	
			City/State and Zip Code	
	SOFT LANDING US, LLC Firm/Company 777 SW 37th Ave STE 510 Address Miami, FL 33135, Estados Unidos City/State and Zip Code carlosandres@moragaitan.com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: OS ANDRES MORA DIAZ Name of Person Area Code Daytime Telephone ed is a check for the following amount: 5.00 Filing Fee \$55.00 Filing Fee & \$55.00 Filing Fee & \$60 Certificate of Status Certificate Copy (additional copy is enclosed)			
			·	cation)
For fur	ther information o	oncerning this matter, please ca	all:	
CARL	OS ANDRES MO	RA DIAZ		
	Name o	f Person	Area Code Daytine	Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2.	5.00 Filing Fee		Certified Copy	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 APR 20 AMIL: 35

WILLKENSOL 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 Li	iability Company were filed on 03-02-2022	and assigned
Florida document number L22000087954	·	
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
ANTCAMO US LLC		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	· <u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered office address on our records, <u>ento</u> fice address here:	er the name of the new
Name of New Registered Agent:	SOFT LANDING US, LLC	
New Registered Office Address:	777 SW 37th Ave Suite 5 Enter Florida street address	10
	Miami	33135 Zip Code
New Registered Agent's Signature, if changing I	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 Changing Registered Agent, Signature of New Registered Agent

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
MGR	PARRY, EWAN	2655 LE JEUNE RD STE 716	
		CORAL GABLES, FL 33134	■ Remove
MGR	CAMPOS MENDOZA DE PARRY	2655 LE JEUNE RD STE 716	
		CORAL GABLES, FL 33134	
			Change
MGR	SOFT LANDING US, LLC	777 SW 37TH AVE SUITE, 510 M	■ ∧dd
			Remove
			Change
MGR	LETCAM ADVISORS LLC	2430 N 61 ST AVENUE HOLLYV ▶	Add
			□ Remove
			C Change
			D Add
			Remove
			Change
 -			🖸 Add
			□ Remove
			□ Change

-	
-	
•	
-	
-	
-	
-	
	·
•	· · · · · · · · · · · · · · · · · · ·
-	
-	
•	
•	
Effect	ive date, if other than the date of filing:
Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
	0.4.12.2022
Dated	04-12-2022
	Uif

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00