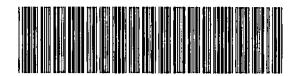
## 12/0000016243

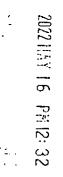
(Re	questor's Name)	-
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2022 HAY 16 PH 12: 32

LONSIX INVESTMENT LLC

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

· <del>_</del>	(A Florida Limit	ed Liability Company)		
The Articles of Organization for this Limited Florida document number L22000096243		any were filed on 03/08/22	and assigned	
This amendment is submitted to amend the following	llowing:			
A. If amending name, enter the new name	of the limited l	iability company here:		
The new name must be distinguishable and contain the	words "Limited L	iability Company," the designation	1"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STRE	ET_ADDRESS			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
B. If amending the registered agent and/or agent and/or the new registered office addr	ess here:	ce address on our records, g	enter the name of the new register	
Name of New Registered Agent:	N/A	···		
New Registered Office Address:		Enter Florida street	address	
		, Florida		
		City	Zıp Code	
New Registered Agent's Signature, if changing	Registered Age	nt:		
I hereby accept the appointment as register	ed agent and a	gree to act in this capacity	. I further agree to comply with t	

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
AMBR	LONDONOS REVOCABLE TRUS	12211 SW 132ND CT	■Add
		MIAMI, FL 33186	□Remove
			Change
AMBR JUAN LONDONO	JUAN LONDONO	12211 SW 132ND CT	
		MIAMI, FL 33186	■Remove
		<del></del>	□Change
			□Remove
			Change
			□Add
			□Remove
			□Remove
			□Change
			□Add
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			□Change

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Fect	ive date, if other than the date of filing: (optional)
ın eff	ective 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 605.020
ote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tent's effective date on the Department of State's records.
Cuiti	ent's effective date on the Department of State's records.
ecor is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
13 111	· ·
	May 11 2022 \land
ited	May 11 - 2022
	$\sim 00MY$
	Signature of a member of authorized representative of a member
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00