

L220000145789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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22 SEP 13 PM 5:19

SECTION OF CORPORATION

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 369 Capital Investment Group, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wesley Belizaire

Name of Person

369 Capital Investment Group, LLC

Firm/Company

500 S Australian Ave, Ste 600-1097

Address

West Palm Beach, FL 33401

City/State and Zip Code

wesley.belizaire@369invest.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wesley Belizaire

561 515-5806
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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REGISTRATION
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

369 Capital Investment Group, 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 03/24/2022 and assigned
Florida document number 122000145789.

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)

500 S Autralian Ave

Ste 600-1097

West Palm Beach, FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

500 S Australian Ave

Ste 600-1097

West Palm Beach, FL 33401

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:

500 S Australian Ave, Ste 600-1097

Enter Florida street address

West Palm Beach

Florida 33401

City

Zip Code

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.

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>	<u>Address</u>	<u>Type of Action</u>
President	Wesley Belizaire	500 S Australian Ave	<input type="checkbox"/> Add
		Ste 600-1097	<input type="checkbox"/> Remove
		West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Change
CEO	Evens P. Campbell	500 S Australian Ave	<input type="checkbox"/> Add
		Ste 600-1097	<input type="checkbox"/> Remove
		West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

22 SEP 13 PM 5:29
OFFICE OF THE
CLERK OF THE
CITY OF PALM BEACH

22 SEP 13 PM 5:20

22 SEP 13 PM 5:20

(If an effective 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 605.0207 (3)(b)

If the record 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 record is filed.

signature of a member or authorized

Wesley Belizaire

Typed or printed name of signee