L22000153161

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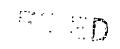
A. EUTL: 1

COVER LETTER

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CHBIECT	ISGAMA INVESTMENT LLC				
SUBJECT	·	Name of Lim	nited Liability Company		
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		MANUEL F CORREA RO	OA		
		-	Name of Person		
			Firm/Company		
		13727 RIDGETOP RD			
			Address		
		ORLANDO, FL 32827			
		i.rteamaxes@gmail.com	City/State and Zip Code		
			to be used for future annual report no	tification)	
For further	information c	oncerning this matter, please c	all:		
MANUEL F CORREA ROA		407 2197191 at ()			
	Name o	f Person	Area Code Daytii	me Telephone Number	
Enclosed is	a check for th	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)	
	ailing Addres egistration S		<u>Street Address:</u> Registration S	ection	
		orporations	Division of Co		
	O. Box 632		The Centre of		
La	illahassee, F	*1. <i>323</i> 14	2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ISGAMA IVESTMENT LLC

2022 OCT 31 PH 1:21

(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 $\frac{03/30/2022}{1}$ and assigned Florida document number 1.22000153161 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 "LLC." 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 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: Enter Florida street address Cuv

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 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	MARIA F FRANCO	13727 RIDGETOP RD	= Add
		ORLANDO, FL 32837	☐Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Add
			□Remove
			□Change

	
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Note:	tive date, if other than the date of filing:
е гесо	rd 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
ord is f	
	October 21 2022
Dated	Tour Jonea.
	Signature of a member or authorized representative of a member
	YALMIN TO TO THE TOTAL OF THE T
	MANUEL F ČORREA ROA Typed or printed name of signee

Filing Fee: \$25.00