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## **COVER LETTER**

TO:

Registration Section Division of Corporations

CHENO IN SUBJECT:	NVESTMENTS GROUP LLC				
<del></del>	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ROSENDO CABRERA				
		Name of Person			
	CHENO INVESTMENTS	GROUP LLC			
		Firm/Company			
	8075 NW 107th Ave. Apt	5-617			
		Address			
	DORAL, FL 33178				
	<del></del>	City/State and Zip Code	<del></del>		
	rosendofinanzas@gmail.co	m			
	E-mail address; (	to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	all:			
ROSENDO CABRERA		786 920-1537			
Name of Person		Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	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)		
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction		
Division of C	orporations	Division of Cor			
P.O. Box 632		The Centre of T			
Tallahassee, I	1L 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records.) Liability Company)	,			
The Articles of Organization for this Limited Liability Company were filed on 04/01/2022  Florida document number 1.22000159097				
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ility Company," the designation "LLC" o	r the abbreviation "L.IS"	212723 (2121)		
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DORAL, FL 33178		5		
	- 25			
8075 NW 107th Ave. Apt 5-617				
DORAL, FL 33178				
address on our records, <u>enter th</u>	e name of the new i	regis		
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## 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
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Note: If the o	te, if other than t late is listed, the date i date inserted in this effective date on the	s block does r	not meet the	applicable stat	filing or more the utory filing requ	(optio in 90 days after t tirements, this	nal) iling.) Pursuant to 6 date will not be l	605.0207 isted as
	ifies a delayed effec	ctive date, but	not an effec	tive time, at 1.	2:01 a.m. on the	earlier of: (b)	The 90th day a	fter the
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rd is filed.	JUNE 12			·				
rd is filed.	JUNE 12		/_					
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