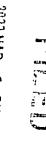
L22000337161

Office Use Only



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COVER LETTER

	Registration Se Division of Cor						
	MPZ INVESTMENTS GROUP LLC						
SUBJEC	T:	Name of Lim	ited Liability Company				
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please ret	urn all correspo	ondence concerning this matter	to the following:				
		MAICOL PACHECO ZAI	PATA				
			Name of Person				
		MPZ INVESTMENTS GR	COUP LLC				
Firm/Company 175 SW 7TH ST STE 1523							
	175 SW 7TH ST STE 1523				2023 HAR		
			Address		i AA		
	MIAMI FL 33130				- 6		
	PH 1: 04						
		GRACERHENALS75@GN	AAILCOM to be used for future annual report notific	ration)	F-0		
For furthe	er information c	oncerning this matter, please c	·		ri +		
	. PACHECO ZA		312 6601735				
	Name o	f Person	at (Telephone Number			
Enclosed	is a check for th	ne following amount:					
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &		
I I	Mailing Addres Registration 5 Division of C P.O. Box 632 Tallahassee, I	Section Corporations 7	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL 3	orations llahassee Street, Suite 8	10		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MPZ INVESTMENTS 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 08/01/2022 and assigned Florida document number L22000337161 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) 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 _. Florida _

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.

City

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JESSICA PACHECO ZAPATA	175 SW 7TH ST STE 1523 MIAMI FL, 33130	= Add
			□Remove
			□Change
			□Add
			□Remove
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			200
			Remove
		(,, [7]	☐ Ch ange
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			Change
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		was to the same of	🗆 Remove
			Change

N/A				
				
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ffective date, if other than the can effective date is listed, the date must tote: If the date inserted in this blo ocument's effective date on the De	ck does not meet the app	dicable statutory filing	(optiona ore than 90 days after fili g requirements, this da	al) ng.) Pursuant to 605.02 ate will not be listed
record specifies a delayed effective Lis filed.	date, but not an effectiv	e time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after th
JANUARY 30	2023			<i>y</i> 2
ated	$\frac{1}{\sqrt{1-x^2}}$			2023 MAR SESSEL
	How obstacke	ø ₅		MAR
	Signature of a member or a	uth dized representative	of a member	-6
MAICOL PACHECO ZA	APATA			0. PH

Filing Fee: \$25.00