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To:		
	Division of Corporations	至逐
•	Fax Number : (850)617-6383	A R S
From:	••	SE SE
	Account Name : R&P ACCOUNTING AND TAXES INC	$m_{ij}$
	Account Number : 120170000090	77
•	Phone : (305)358-1310	-5 N
	Fax Number : (305)503-6701	· ·
	the email address for this business entity to be used nual report mailings. Enter only one email address plea	
Ema	111 Address: arod8723@gmail.com	·

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ION INVESTMENTS USA LLC

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Fram: Andres Rodriguez

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ion inve	ESTMENTS USA LLC	
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our reco ia Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability	Company were filed on 09/26/2022	and assigned
Florida document number L22000420615	_ <del>_</del> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	•
<u> </u>	. •	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
(Principal office address MUST BE A STREET ADD	RESS)	<u> </u>
	·	
Enter new mailing address, if applicable:		\$20
(Mailing address MAY BE A POST OFFICE BOX)	****	100
. •	-	
P. If amending the registered agent and/an excitation	d affin adduse on any manage and	77.22
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	a office address on our records, enti	er the name of the new registered
		,
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	·ess
	,	Torida
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

From: Andres Rodriguez

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	Name	Address	Type of Action
AMBR	SANTIAGO DURANGO	2884 NW 80th AVE	□Add
		SUNRISE, FL 33322	<b>В</b> Rетю∨е
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	By J. 2022	·		