## L22000423268

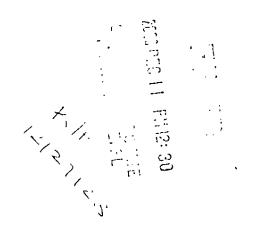
(Requestor's Name)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	—
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:LA	DOLCE INVESTMENTS	SLLC	
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	MADOINA HIJETE		
	MARGINA HUETE	Name of Person	····
	LA DOLCE INVEST	MENIS LLC Firm/Company	<del></del>
	13115 3RD ST E 1B	Address	
	MADEIRA BEACH FL		
		City/State and Zip Code	
	titoarguello@me.com	City/State and Zip Code	
		to be used for future annual report notifi	
For further information of	concerning this matter, please ca	all:	17. 20 17. 20 17. 20
MARGINA HUETE		at (813 ) 895-7299	
	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LA DOLCE INVESTMENTS				
(Name of the Limited (A	Florida Limited	ny as it now appears on our re Liability Company)	coras.)	
The Articles of Organization for this Limited Liab	oility Company	were filed on 09/30/2022	!	and assigned
Florida document number L22000423268	·			
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liab	ility company here:		
, <u> </u>	.,, .			
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation "	'LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	6421 BAYOU GRAND	E BLVD N	NE	
(Principal office address MUST BE A STREET	ST PETERSBURG FL	33702	<del></del> -	
				e- 5
		0.404 0.404 0.0044	NE DI VID 1	
Enter new mailing address, if applicable:		6421 BAYOU GRAND	DE READ L	NE '
(Mailing address MAY BE A POST OFFICE BO	ST PETERSBURG FI	_ 33702		
		<del></del>		
B. If amending the registered agent and/or reg	ristered office :	address on our records, er	nter the na	me of the new regi
agent and/or the new registered office address	<u>here</u> :			00
Name of New Registered Agent:	ALPHAPRO	MED		
New Registered Office Address:	5402 PION	EER PARK BLVD SUITE	EE	
		Enter Florida street a	ddress	
	TAMPA		, Florida _	33634
		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>	Name	Address	Type of Action
MGR	THISAL JAYASURIYA	6201 johns road suite 9	□Add
		tampa fl 33634	⊠Remove
			□ Change
			□Add
			□ Remove
			□Change
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		15
Affective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be prior to date of filing.  Note: If the date inserted in this block does not meet the applicable statuto document's effective date on the Department of State's records.	ing or more than 90 days after filing.) Pursua ory filing requirements, this date will no	nt to 605.0207 ( it be listed as t
record specifies a delayed effective date, but not an effective time, at 12:0 d is filed.	H a.m. on the earlier of: (b) The 90th of	day after the
Dated DECEMBER 1 , 2023		
DECEMBER 1 , 2023  Signature of a member or authorized representations of a member of authorized representation of a member of a member of authorized representation of a member of authorized representation of a member of a	sentative of a member	

Filing Fee: \$25.00