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SÚBJECT:	YELLOW	TEAM INVESTMENTS LLC			· · · · · · · · · · · · · · · · · · ·	· •
SOUTECT.	Name of Limited Liability Company					
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	n all correspo	endence concerning this matter	to the following:			
		Rodrigo Zuloaga				
			Name of Person			
		YELLOW TEAM INVES	TMENTS LLC			
			Firm/Company			
		560 Village Blvd Suite 28	0			
			Address			
		West Palm Beach / FL 334	409			
			City/State and Zip Code			
		rzuloaga@thegreenshape.co				
		E-mail address: (to be used for future annual report	notification)		
For further in	nformation c	oncerning this matter, please c	all:			
Rodrigo Zul	oaga		561 9894070 at ()			
	Name o	f Person		ytime Telepho	ne Number	
Enclosed is a	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)	≣	Certified	e of Status &

Street Address:
Registration Section
Division of Corporations

The Centre of Tallahassee

Mailing Address: Registration Section Division of Corporations

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YELLOW TEAM INVESTMENTS LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records. d Liability Company)	.)
he Articles of Organization for this Limited Liability Compar	ny were filed on 10/13/2022	and assigned
lorida document number 1.22000441207		_
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lia	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	bility 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)		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office	e address on our records, <u>enter t</u>	he name of the new registe
gent and/or the new registered office address here:		
Name of Nam Designand Access		
Name of New Registered Agent:		
New Registered Office Address:	·	
	Enter Florida street address	
	, Flor	rida
	City	Zin 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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Alfonso Machado	560 Village Blvd Suite 280	
		West Palm Beach, FL 33409	≣Remove
			□ Change
MGR	Rodrigo Zuloaga	560 Village Blvd Suite 280	Add
		West Palm Beach, FL 33409	□Remove
			□Change
MGR	Eduardo Sacco	560 Village Blvd Suite 280	≡ Add
		West Palm Beach, FL 33409	⊡Remove
			Change
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			□Change

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n effective date is liste te: If the date inser nument's effective d	er than the date of d, the date must be specified in this block does late on the Departmen	tic and cannot be prior not meet the appli it of State's records	cable statutory fili s.	nore than 90 days at ng requirements.	his date will no	ot be listed a
s filed.	ayed effective date, bu	n not an effective t	nme, at 12:01 a.m.	on the eartier of:	(b) The 90th	day after the

Filing Fee: \$25.00

Signature of a member or authorized representative of a member

Typed or printed name of signee

Rodrigo Zuloaga