L2300004395

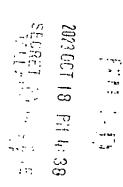
(Requestor's Name)
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COVER LETTER

TO: Registration Sec Division of Corp	tion orations		, ,	*
SIRISA IN	ESTMENTS LLC			
SUBJECT:		Liability Company		
The enclosed Articles of	Amendment and fee(s) are submit	ted for filing.		
	ndence concerning this matter to			
	GERMAN D SANCHEZ BA	RAJAS		
		Name of Person		
	Gremen	Sucher		~3
	13550 VILLAGE PARK DE	Firm/Company		9023 OC SECIO
	13330 VILLITOR TANKS	Address		
	ORLANDO, FL 32824	Addition	_	2023 OCT 18 PH 14 38 SECKETY 14 14 14 38
		City/State and Zip Code		<u>۔</u> پ
	E-mail address: (to	be used for future annual report notific	ation)	111 20
For further information	concerning this matter, please ca	II:		
GERMAN D SANCH		425 289-6740 _at ()	Telephone Number	
Nam	e of Person	Area Code Daytime	Telebuotte (Agrico)	
Enclosed is a check fo	r the following amount:		T 000 00	Eiling Foe
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	cate of Status & ed Copy nal copy is enclosed)
Division (P.O. Box	on Section of Corporations	Street Address: Registration Seconds of Core The Centre of Tallahassee, FL	porations Fallahassee he Street, Suite	e 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIRISA INVESTMENTS 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

L23000004395

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 "LLC."

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:

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

Enter Florida street address

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
AMBR	NATALIA SILVA RIVEROS	13550 VILLAGE PARK DR, SUITE 125	□Add
		ORLANDO, FL 32837	■Remove
			□Change
AMBR	IRMA C RIVERA RODRIGUEZ	13550 VILLAGE PARK DR, SUITE 125	= Add
		ORLANDO . FL 32837	□Remove
			□Change
AMBR	DANIEL SILVA RIVEROS	13550 VILLAGE PARK DR, SUITE 125	≣Add
		ORLANDO, FL 32837	🗆 Remove
			□Change
AMBR	EDUARDO SILVA BERMUDEZ	13550 VILLAGE PARK DR. SUITE 125	<u>≓</u> B Add
		ORLANDO, FL 32837	OCT
		·	□Change
			Tage Section 1
		·	□ Remove
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ective date, if other than the date of filing:	date of filing or mor	re than 90 days afte	ional) er filing.) Pu is date will	rsuant to 60 not be lis	05.020 sted a
cord specifies a delayed effective date, but not an effective times filed.	z, at 12:01 a.m. or	the earlier of: (b) The 90	th day aft	ter the
OCTOBER 06 /2023					
•					
Signature of a member or authorize	2 red representative o	f a member			

. . .

Filing Fee: \$25.00