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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : 12000000083 : (305)932-6262 Fax Number : (305)933-9393

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JAN 25 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTMENT SK LLC					
(Name of the Limited Liabili (A Florida	ty Company as it a Limited Liability	Company)	records.)		
The Articles of Organization for this Limited Liability C	Company were	filed on 01/18/20	023	and assign	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	ited liability co	ompany here:			
	-				
The new name must be distinguishable and end with the words "Lir	mited Liability Co	mpany," the designati	on "LLC" or the ab	breviation "L.L.	C."
Enter new principal offices address, if applicable:	209	00 NE 30th Av	venue		
(Principal office address MUST BE A STREET ADDR	<u>SESS)</u> Sui	te 401			
	Ave	entura FL 3318	0		
Enter new mailing address, if applicable:	209	100 NE 30th Av	venue		
(Mailing address MAY BE A POST OFFICE BOX)	Sui	te 401			
	Ave	entura FL 3318	0		
registered agent and/or the new registered office addr Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
_			, Florida		
	Cit	v		Zip Code	
New Registered Agent's Signature, if changing Registered					
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete perfor gent as provide	mance of my duti ed for in Chapter	es, and I am fa 605, F.S. Or, ij	miliar with a This docume	nd
	If Changing Re	gistered Agent, <u>Sign</u>	ature of New Regi	stered Agent	_
	Page 1 of 3		::	1424 PH 4	

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u> Title</u>	Name	Address	Type of Action
			
			Remove
<u></u>			D Add
			□ Remove
			
			_C Add
			☐ Remove
			
			Remove
	·····		Add
			Remove
			
			□ Add
			Remove

D. If am	•	-	: (Attach additional sheets, if necessary:) JARDO SZKOLNIK, MAURICIO KIBLISKY			
	and JOHN SZKOLNIK to 20900 NE 30th Avenue, Suite 401, Aventura FL 33180					
			<u></u>			
(The ef		ot be prior to date of receipt or file	(optional) Ed data and cannot be more than 90 days after			
	the this document is filed by the Flo	• *				
Dated	January 23					
	<u>·</u>	Member Manager)	Digitalny signed by John Szkolnik (Member Manager) ON ch±John Szkolnik (Member Manager), o, du±As Member Manger, email=SZKOŁNIK@GMAIL COM, c=U\$ Date: 2023 61:23:12/09/09-05/001			
		Signature of a member or author	ized representative of a member			
	John Szkolnik	(
		Limad or papier	Carra at aurman			