L23000014221

(Requestor's Name)
Addition
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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J. HORNE
JAN 18 2024

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:		Name of Limi	ted Liability Company		
The enclosed	l Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please return	all correspor	ndence concerning this matter t	to the following:		
		GUILHERME DAROCHA	\		
			Name of Person		
			Firm/Company		<u> </u>
		291 SANTAREM CIRCLE			
		PUNTA GORDA, FL 3398	Address		
			City/State and Zip Code		
For further i	nformation co	E-mail address: (to	o be used for future annual re	port notification)	
	иE DAROCH	-	508 353-	-0821	
	Name of	Person	at () Area Code	Daytime Telepho	ne Number
Enclosed is a	t check for the	e following amount:			
□ \$25.00 H	Filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIXBUILD INVESTMENT GROUP LLC

24 JAN 18 AH 9: 33

(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 Co	ompany were filed on 02/09/2023	and assigned
Florida document numberL23000074227	_ -	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit		
Enter new principal offices address, if applicable:	320 WARFIE ESS) Venice FL 3	WAVE.
(Principal office address MUST BE A STREET ADDRE	ESS) Venice FL 3	4285
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:		
Name of New Registered Agent:	aymond Garcia	
New Registered Office Address: 32	20 WARFIELD A	ve,
	Lymond GARCIA DO WAR FIELD A: Venice Florida street address City Flo	rida 34285
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	GUILHERME DAROCHA	291 SANTAREM CIRCLE PUNTA GORDA FL 3	39t □Add
			= Remove
			□Change
<u>. –</u>			□Add
			□Remove
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	01/17/2024
(If an effi <u>Note:</u>	ve date, if other than the date of filing:
f the record ecord is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	January 17 . 2024

EU. E. 655.04

Typed or printed name of signee