L23000127636

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COVER LETTER

Registration Section Division of Corporations

TO:

YNY CREATIVE INVESTMENT, LLC SUBJECT:						
	Name of Lir	nited Liability Company				
The enclosed Articles of A	Amendment and fee(s) are sul	omitted for filing.				
Please return all correspon	idence concerning this matter	to the following:				
	YAMILA V OLAECHEA	.				
		Name of Person				
		Firm/Company				
	7061 SW 11TH STREET					
	-	Address				
	PLANTATION, FL 3331	7				
		City/State and Zip Code				
	yamilaolaechea@gmail.cor					
	E-mail address: (to be used for future annual report not	ification)			
For further information con	ncerning this matter, please c	all:				
YAMILA V OLAECHEA		305 303-2395				
Name of I	Person	Area Code Daytin	ne Telephone Number			
Enclosed is a check for the	following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address:	etion	Street Address:	etion			
Registration Section Division of Corporations		——————————————————————————————————————	Registration Section Division of Corporations			
P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FI	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YNT CREATIVEINVESTTMENT, 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 03/13/2023 and assigned Florida document number L23000127636 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: YNT CREATIVE INVESTMENT, LLC The new name must be distinguishable and contain the words "Limited Liability 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) 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: Enter Florida street 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.

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>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
		· .	Change
			□Add
			□Remove
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			□Remove
			□Change

	nation, enter change(s) here: (Attach additional sheets, if necessary.)	
		
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 (If an effective date is listed, the date n 	the date of filing: 03/05/2023 (optional)	uant to 605.0207 (3)(l not be listed as the
f the record specifies a delayed effect record is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	day after the
Dated May 05	2023	
	Catherita .	
-	Signature of a member of authorized representative of a member	
	Upmila, V Uloechea.	

Filing Fee: \$25.00