LZ3000150208

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer,	





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SECRETARRESSEE LITTERS

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COVER LETTER

TO: Registration S Division of Co		<i>t</i> , ,			
AEOTIO?	N INVESTMENTS, LLC				
Jobbett,	Nume of Li	mited Liability Company	<u></u>		
The enclosed Articles of	f Amendment and fee(s) are so	bmitted for filing			
	ondence concerning this matte	•			
	ALEXANDRA MANOS	ALVAS			$A = \mu = 2$
		Name of Person	Contract Care	<u>14 Marting 14</u>	je ja 44.00 salase i je s
	SARIOL BUSINESS GR	OUP, LLC	1		•
		Firm/Company	. 14		11 12,
	8200 NW 41ST STREET	, SUTTE 315	Limital A	SE NOT 1886 E	Bright with the
		Address			
	DORAL, FLORIDA 3310	56		ta est es s	a tibbo a iliang sa sa sa
	legzl@bigpile.com	City/State end Zip Cor	ie at Vist		and Marrie er
		(to be used for future gran			The tracket of annual annual live of
For further information o	oncerning this matter, please o	-a(1)·			
ALEXANDRA MANOS		786 -		note through the more	renderin etaer
Name of	Person	st () Area Code	Daytime To	dephase Number	
				4 44	
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Fiting For Certified Copy (additional copy is o		Certificate o Certified Co (addining cup	f Status & py
Registra	NG ADDRESS: nion Section of Corporations	Registra	ET/COURIER ation Section of Corporation		

P.O. Box 6327 Tallahassoe, FL 32314 Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Name of New Registered Agent: New Registered Office Address:	8200 NW 41ST STREET. E DORAL	SUITE 200 inter Florida street address , Florid	la ³³¹⁶⁶	
		 		
	8200 NW 41ST STREET.	SUITE 200		
Name of New Registered Agent:				
			_ _	
	_			
If amending the registered agent and/or nt and/or the new registered office addr	2	n our records, <u>enter the</u>	name or the ne	w registe
If amounting the presint and president and described	internal office address	- a.ua.a.u.da austa- 44-a	=	
	<u></u>			<u>: 'r</u>
<u>ailing address MAY BE A POST OFFICE</u>	<u></u>		<u> </u>	
ter new mailing address, if applicable:			AUG 2	
			2023 SEC TALL	
				
incipal office address MUST BE A STRE	ET ADDRESS)			
er new principal offices address, if appli	cable:			
new name must be distinguishable and contain the	words "Limited Liability Compan	y," the designation "LLC" or	the abbreviation "L	.L.C."
The same of the sa		•		
If amending name, enter the new name	of the limited liability comr	oany here:		
is amendment is submitted to amend the fol	lowing:			
orida document number L23000150208	·			
Articles of Organization for this Limited l	_iability Company were filed	d on March 24, 2023	and ass	signed
	(,,,	mpany)		
· · · · · · · · · · · · · · · · · · ·	ited Liability Company as it nov (A Florida Limited Liability Co			

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 = A	uthorized Member		
Titte	Name	Address	Type of Action
			C Add
			□ Remove
			Change
			C) Add
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Filing Fee: \$25.00