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Account Name : STOLZENBERG, GELLES & FLYNN, LLP

Account Number : I20100000018 Phone : (305)961-1450 : (305)423-3979 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: roland@windsorinvestmentholdings.com

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T. LEMIEUX JAN 1 0 2024 01/05/2024 17:30 From: 3054233979 Stolzenberg, Gelles Webfa Page: 1/3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

·		
	R INVESTMENTS (MAYFIELD CON	
(Name of the Limited	Liability Company as it now appears on o Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liab Florida document number		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
WI 1058, LLC		
The new name must be distinguishable and contain the word	is "Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	.2,
B. If amending the registered agent and/or reg		ls, enter the name of the new registere
agent and/or the new registered office address	<u>here</u> :	, m
		7.
Name of New Registered Agent:		<u>~</u> _
New Registered Office Address:		<u> </u>
······	Enter Florida sti	vei oxldress
		, Florida
	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

01/05/2024 17:00 From:3054233979

Stolzenberg, Gelles Webfa Page:2/3

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
			□Remove
		Change	
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		change(s) here: (Attach additional sheets, if necessary.)
		
		
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(If an effective da Note: If the d	e, if other than the date of filities is listed, the date must be specific at ate inserted in this block does not fective date on the Department of	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (r meet the applicable statutory filing requirements, this date will not be listed as t
ne record specifiord is filed.	ies a delayed effective date, but n	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	JANUARY 5	2024
	Han	ació E arango
	Signature of	a member or authorized representative of a member
	•	IGNACIO E. ARANGO
		Typed or printed name of signce