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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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	Registration Se Division of Co	
SUBJEC	DRIZZLE	INVESTMENTS LLC
OUIFIC.	···	Name of Limited Liability Company
The enclo	osed Articles of	Amendment and fee(s) are submitted for filing
Please ret	turn all correspo	ondence concerning this matter to the following.
		IZZLE INVESTMENTS LLC Name of Limited Enability Company icles of Amendment and fee(s) are submitted for filling correspondence concerning this matter to the following. MARIA ISABEL ROMERO ALVAREZ Name of Person DRIZZLE INVESTMENTS LLC Firm/Company 1815 EWELL RD Address LAKELAND, FL 33811 City/State and Zip Code maribelroal@gmail.com E-mail address (to be used for future annual report notification) nation concerning this matter, please call. ROMERO ALVAREZ Name of Person ROMERO ALVAREZ Name of Person Daytime Telephone Number Sk for the following amount: Fee S30 00 Filing Fee & Certified Copy Lordificate of Status & Certified Copy
		Name of Person
		DRIZZLE INVESTMENTS LLC
		Firm/Company
		1815 EWELL RD
		Address
		LAKELAND, FL 33811
		City/State and Zip Code
		E-mail address (to be used for future annual report notification)
For further	r information c	oncerning this matter, please call.
MARIA I	SABEL ROME	
	Name o	
Enclosed	is a check for th	ne following amount:
■ \$25.0	0 Filing Fee	Certificate of Status Certified Copy Certificate of Status &

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327

Street Address:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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DRIZZLE INVESTMENTS 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 I		n <u>08/15/2023</u>	and assigned
Florida document number L23000383724			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compan	y here:	
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" c	r the abbreviation "L. L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE			_
induing maness meri 1912. Vi O.91 (7) I I C.			
B. If amending the registered agent and/or agent and/or the new registered office addr		ur records, <u>enter th</u>	e name of the new register
Name of New Registered Agent:	ROMERO ALVAREZ, MARIA I		
New Registered Office Address:	1815 EWELL RD		
	Enter Florida street address		
	LAKELAND	. Flori	da 33811
	City		Zıp 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.



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MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
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		LAKELAND, FL 33811	₹Remove
			□ Change
AMBR	ROMERO ALVAREZ, MARIA I	1815 EWELL RD	≣Add
		LAKELAND, FL 33841	□Remove
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