L24000094746

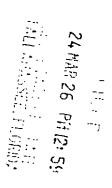
(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
	J. HORN	NE
	APR - 1 2	2024
	·	





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03/26/24--01011--012 **25.00



COVER LETTER

TO: Registration So Division of Co			
	INVESTMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	CARGUA SANCHEZ PEI	DRO A	
		Name of Person	
	****	Firm/Company	
	11813 GINSBERG PL		
		Address	
	ORLANDO, FLORIDA, 3	2832	
		City/State and Zip Code	
	PSCINVESTMENTLLC@0		
	E-mail address: ()	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
BETZI BLANCO		407 6330813 at ()	
Name (of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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 AMEND. TO ARTICLES OF ORGANIZATION OF OF Our records.

IA&BROS INVESTMENT LLC

(Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company)

		1402
The Articles of Organization for this Limited Liability Cor	mpany were filed on 02/23/2024	and assigned
lorida document number L24000094746	<i>,</i>	
This amendment is submitted to amend the following:		
. If amending name, enter the new name of the limite	ed liability company here:	
he new name must be distinguishable and contain the words "Limited	ed 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 ADDRE	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered o	affice address an our records, enter	the name of the new register
gent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	y .
	, Flo	orida
	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, 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
AMBR	VELEZ SANCHEZ, RICARDO X	10440 118TH ST	_ 🗆 Add
		JAMAICA, NY 11419	_ = Remove
			_ 🗆 Change
AMBR	CARGUA SILVA PEDRO V	KM 1.5, VIA SAMBORONDON, EDIF SAMBORO	N _ ≅Add
		PLAZA, PISO 5, OF 509	□Remove
		ECUADOR, SAMBORONDON, 092302	_ □Change
			□Add
			_ 🗆 Remove
			_
			□Add
			□Remove
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			_ □Remove
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			□Remove
			Change

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	e date, if other that	n the date of filing te must be specific and his blook does not a	g:d cannot be prior to	date of filing or more that	(optiona an 90 days after filir uirements, this da	l) ng.) Pursuant to 605.0207
Note: If (the date inserted in t it's effective date on			,		te will not be listed as
Note: If document	the date inserted in t it's effective date on specifies a delayed ef	the Department of S	State's records.	ne, at 12:01 a.m. on the		
Note: If document e record s rd is filed.	the date inserted in t it's effective date on specifies a delayed ef	the Department of S	State's records.			
Note: If document e record s rd is filed.	the date inserted in t it's effective date on specifies a delayed ef l.	the Department of S	State's records. t an effective tim			
Note: If I document e record s rd is filed.	the date inserted in t it's effective date on specifies a delayed ef l.	the Department of S	State's records. t an effective tim 10:00 AM	ne, at 12:01 a.m. on the	e earlier of: (b)	The 90th day after the
Note: If document e record s rd is filed.	the date inserted in t it's effective date on specifies a delayed ef l.	the Department of S	State's records. t an effective tim 10:00 AM		e earlier of: (b)	The 90th day after the

Filing Fee: \$25.00