L24000252445

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COVER LETTER

Tallahassee, FL 32314

TO:	Registration S Division of Co					
CHD IEA	CTP.	LRE L.L.C.				
Name of Limited Liability Company						
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		CRUZ CACERES, REINA	ALDO			
			Name of Person			
Firm/Company						
		1714 US-27 #18,				
			Address			
		CLERMONT, FL 34714				
			City/State and Zip Code			
		IST.FCC.SERVICES@GM	AIL.COM to be used for future annual report not	(flooring)		
For furth	her information o	concerning this matter, please ca	·	incarion)		
REINALDO CRUZ CACERES			407 534-2911			
	Name o	of Person	at () Area Code Daytin	ne Telephone Number		
Enclosed	d 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 Addre		Street Address:	ection		
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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INVESTFLRE L.L.C.

(Name of the Limited Liability Company as it now appears on out records 9 - 3 PM 1:59

The Articles of Organization for this Limited Liability Company	were filed on 06/21/20	SECRETALY OF STA	TE Passigned
Florida document number L24000282443		00000111	_
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designa	ation "LLC" or the abbreviatio	n "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)			
			<u></u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our record	ds, <u>enter the name of the</u>	new registered
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:			
	Enter Florida st	reet address	
		Florida	
	City	Zip C	'ode
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	WITTY, CREGG A	1714 US-27 #18 CLERMONT, FL 34714	□Add
			≣Remove
			□ Change
			□Add
			□Remove
			□Change
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			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 08/11/2024 _ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated __ Signature of a member or authorized representative of a member **REINALDO CRUZ CACERES**

Typed or printed name of signee