L24000332536

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08/13/24--01028--011 **25.00

COVER LETTER

TO: Registration Section Division of Corporations

INVESTMENT M.M. & A LLC SUBJECT: _____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAURICIO ALZATE

Name of Person

Firm/Company

109 COLORADO ST

Address

DONNA, TX 78537

City/State and Zip Code

MYM0830@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

407

For further information concerning this matter, please call:

MAURICIO ALZATE

Name of Person

at (_____) ____ Area Code

3431835

Enclosed is a check for the following amount:

🛢 \$25.00 Filing Fee

☐ \$30.00 Filing Fee & Certificate of Status S55.00 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

Daytime Telephone Number

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTMENT M.M. & A LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/26/2024 and assigned Florida document number L24000332536

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Con	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Muiling address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ldress
_	City	. Florida 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 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>	Name	<u>Address</u>	Type of Action
AMBR	ACTUAL BUSINESS & INVESTMENT	109 COLORADO ST	⊒ ∧dd
	Coup	DONNA, TX 78537	🗆 Remove
AMBR	MAURICIO ALZATE	109 COLORADO ST	🗆 Add
		DONNA, TX 78537	■ Remove
			□Change
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			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) REMOVING MAURICIO ALZATE AS AMBR AND ADDING ACTUAL BUSINESS & INVESTMENT CORP.

AS THE NEW AMBR OF THE COMPANY				
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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	Lugust 7. 2024
	Clad
	Signature of a member or authorized representative of a member
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	Typed or printed name of signee