Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000385387 3)))



H240003853873ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAXLEAF.COM INC Account Number : I2014000084 Phone : (305)527-6617 Fax Number : (786)713-1940

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HYDRA USA INVESTMENT LLC

Certificate of Status	0
Certified Copy	()
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NVESTMENT LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L24000336322	were filed on <u>07/30/2024</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	Hity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u>-</u>	*
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	****	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
		,- ,- ,-
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter th	ie name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	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

o: CORPORATE AMENDMENT

ding Authorized Person(s) authorized to manage, enter the Ilile, name, and address of each person, being added moved from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	FORERO, FABIO ANDRES	1549 NE 123RD ST	B Add
		NORTH MIAMI, FL 33161 UN	□Remove
			CChange
MGR	FORERO, FABIAN	1549 NE 123RD ST	□Add
		NORTH MIAMI, FL 33161 UN	□Remove
			≅Change
			Dⅆ
			□Remove
			Change
		<u> </u>	□Remove
		<u> </u>	□ Change
		<u> </u>	
		 	ORemove
			OChange
			□Add
			□Remove
			DChange

famending any other informatio	n, enter change(s) ne	re: (Allach acaillor	iai sneeis, ij necessar)	y.)
				
			<u> </u>	
				
				
		<u> </u>		
				
				
*				
Effective date, if other than the da f an effective date is listed, the date must be	ite of filing:	or to date of filing or mo	(optional	t.) Pursuant to 605,0207 (3)(b)
Note: If the date inserted in this block locument's effective date on the Depa	does not meet the appli	icable statutory filing	requirements, this date	e will not be listed as the
record specifies a delayed effective dad is filed.	ate, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b) T	he 90th day after the
NOVEMBER 15TH	2024			
	lat	<u> </u>		
Sig	mature of a member or aut	horized representative	of a member	
•				