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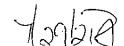
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			
	STMENT LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	JOSE МЕЛА		
		Name of Person	
	M3 INVESTMENT LLC		
		Firm/Company	
	12815 SW 105 TERR		
		Address	
	MIAMI, FL 33186		
	catellez1@hotmail.com	City/State and Zip Code	
	-	to be used for future annual report not	ification)
For further information c	concerning this matter, please c	all:	
JOSE MEJIA		305 7215046 at ()	
Name c	of Person	Area Code Daytin	ne 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	rporations
P.O. Box 632	27	The Centre of 7	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M3 INVESTMENT LLC			
(Name of the Lin	nited Liability Con (A Florida Limit	apany as it now appears on our re ed Liability Company)	ecords.)
The Articles of Organization for this Limited	Liability Compa	ny were filed on 03/11/2021	and assigned
Florida document number 1.21000102709			
his amendment is submitted to amend the fo			
A. If amending name, enter the new name	of the limited li	ability company here:	
BM INVESTMENT LLC			
The new name must be distinguishable and contain the	words "Limited Lis	ability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	
Principal office address MUST BE A STRE	ET ADDRESS)		
		N/A	رسما
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u></u>
			· · · · · · · · · · · · · · · · · · ·
	' 4 1 CC	1.1	
 If amending the registered agent and/or gent and/or the new registered office addr 		e address on our records, <u>er</u>	iter the name of the new regist
			****** *******************************
Name of New Registered Agent:	N/A		-1
New Registered Office Address:	N/A		
		Enter Florida street ac	ldress
	N/A		, Florida
		Сиу	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
			□Add
			Remove
			□ Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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ffective date, if other than the of an effective date is listed, the date must sote: If the date inserted in this blo ocument's effective date on the De	date of filing: he specific and cannot ck does not meet the	e applicable sta	f filing or more the utory filing requ	(optiona in 90 days after filir iirements, this da	l) (g.) Pursuant to 605,020 (ie will not be listed a
record specifies a delayed effective I is filed.	date, but not an effo	ective time, at 1	2:01 a.m. on the	earlier of: (b)	The 90th day after th
oated	. 202	1			
	Signature ni a member	e 7e	oresentative of a n	ember	
•					

Filing Fee: \$25.00