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(Requestor's Name)			
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(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Certified copies Certificates of Status			
Special Instructions to Filing Officer:			
A. LUNT			
_ "			
MAR 29 2010			
EXAMINER			

Office Use Only



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COVER LETTER

P.O. Box 6327 Tallahassee, FL 32314

TO: Registration of	on Section Corporations					
SUBJECT:		vestments LLC				
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.				
Please return all corr	respondence concerning this matte	r to the following:				
	·,	Victor A. de Diego				
		Name of Person				
		Firm/Company		**************************************		
		708 Anastasia Ave		() () () () () () () () () ()	2011	
		Address				-
		oral Gables, FL 33134		603 g	28	3
		City/State and Zip Code		五 (4) 部	PH	T.
	victor_dediego@hotmail.com E-mail address: (to be used for future annual report notification)				٦ ا	i.
Frankrathan in Comment			ion)	Tan	r's	
For further informati	on concerning this matter, please	call:				
	/ictor A. de Diego	u.(1-0909			
Na	me of Person	Area Code & Daytime To	elephone Number			
Enclosed is a check	for the following amount:					
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filin Certificate Certified (additiona	e of Stati Copy		ed)
			(additional)	vopj 1)
MAILING ADDRESS: Registration Section		STREET/COURIER Registration Section	ADDRESS:			
	vision of Corporations	Division of Corporations				

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	VCD Investr			7 . 2	
(Name of the Limited (A	Liability Compar Florida Limited L	ny as it now appear iability Company)	s on our records.)	景 三	7
The Articles of Organization for this Limited Liability Company were filed on 5/24/10				and assigned	. 1
Florida document number L10000056	,		で歌 主	T	
This amendment is submitted to amend the follo	wing:			2: 42	
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Compa	ny," the designation "	LLC" or the abbreviation	on
Enter new principal offices address, if applicable:		708 Anastasi	a Ave		
(Principal office address MUST BE A STREET	(ADDRESS)	Coral Gables	, FL 33134		
Enter new mailing address, if applicable:		708 Anastasia	a Ave		
(Mailing address MAY BE A POST OFFICE BOX)		Coral Gables, FL 33134			
B. If amending the registered agent and/or registered agent and/or the new registered off			ur records, <u>enter</u>	the name of the ne	w
Name of New Registered Agent:	Victor A. de	Diego			
New Registered Office Address:	708 Anastas				
		dress			
	Co	oral Gables	, Florida	33134	
		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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

	<u>Fitle</u>	<u>Name</u>	Address	Type of Action
Add Remore Add Remore R				Add Remove
Add Remove the state of the sta				☐ Add ☐ Remove
Dated March 24. 2011. With Add Standard March 24. 2011. With Add Standard March 24. 2011.				Add
Dated March 24 . 2011. With Add March 24 . 2011.				Remove
Dated March 24 . 20/1. With At Date				A Remove
Dated March 24, 20/1. Which Ale Dated			-	<u> </u>
With de De). If ameno	ling any other information, enter ch		<u> </u>
With de De				_ _
With de De				
Signature of a member or authorized representative of a member	Dated	arch 24.	10//	
=-0 o. n manner or namoneed representative or a memori		Signature of a mer	mber or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00