## L00000012209

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**EXAMINER** 



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12/31/09--01020--000 \*\*25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DEC 31 PM 1: 4:

## **COVER LETTER**

то:	Registration Se Division of Cor					
SUBJI	FCT•	PRO-INV	ESTMENTS, LLC			
50.001			ited Liability Company			
The en	closed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please	return all correspo	ondence concerning this matte	r to the following:			
			OSCAR VARGAS			
			Name of Person			
	PRO-INVESTMENTS, LLC					
			Firm/Company			
	2700 GLADES CIRCLE, SUITE 111				-i N	
			Address	1	2001	
	WESTON, FL 33327				2009 DEC 31 SECRETAR	7
			City/State and Zip Code	ſ	<u></u> <	
		E-mail address:	(to be used for future annual report notification			C
For fur	rther information of	concerning this matter, please	call:	1	I: <b>\.5</b> STATE LORIDA	
	oso	CAR VARGAS	ut\	6-2000		
	Name o	of Person	Area Code & Daytime Te	lephone Number		
Enclos	sed is a check for t	he following amount:				
<b>▼</b> \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional of	of Status &	ed)
	Regist Divisio P.O. B	AING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRO-IN	<u>VESTMENTS, LLC</u>	<u> </u>			
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now apper Limited Liability Company	ars on our records.)			
· · · · · · · · · · · · · · · · · · ·					
The Articles of Organization for this Limited Liability	Company were filed on	OCT. 6, 2007	and assigned		
Florida document numberL00000012209	·				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company he	ere:			
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	pany," the designation "	LLC" or the abbreviation		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	RESS)		——————————————————————————————————————		
			F. 69		
Enter new mailing address, if applicable:			3		
(Mailing address MAY BE A POST OFFICE BOX)	, n				
,	<u></u>		500		
B. If amending the registered agent and/or regis	stered office address on	our records, enter	the name of the nev		
registered agent and/or the new registered office add	dress here:	· — -			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
		, Florida			
	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GUILLERMO V	ARGAS 2700 GLADES CIRCLE, #1 WESTON, FL 33327	11 Add  Remove
<del></del>			□ D
			□ Dα
			AddRemove
			AA RECO
			SSEC. D
D. If amer	nding any other informa	ition, enter change(s) here: (Attach additional sheets, i	
-			
_	12/29	2009	
Dated	( )	gnature of a member or anuborized representative of a member	:r
	2,8	GUILLERMO VARGAS	-
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00