	UNIFORM BU			RT	(UBI	R)			# 3			
DOCUMENT # L0000013999  1. Entity Name PLATO INVESTMENTS, LLC.							FILED 01 APR 12 AM 9: 34					
												Principal Place of Business  211 E. INTERNATIONAL SPEEDWAY BLVD.  DAYTONA BEACH FL 32118  Mailing Address 211 E. INTERNATIONAL SPEED DAYTONA BEACH FL 32118  DAYTONA BEACH FL 32118
118												
2. Principal P	lace of Business	3. Mailing Address					- I (BETILBI) BIJI BENIJ BONJ BONJ BONJ BONJ BONJ BONJ NOBO (INTO NODIO (DI)O (BIJ 1901					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE					
City & State	Ө	City & State				4.	4. FEI Number					
Zip Country		Zip			Country			_5Certificate of Status Desired \$5.00 Additional				
	6. Name and Address of Curre	ent Registe	Registered Agent			7. Name and Address of New Registered Agent						
GARDNER, ROBERT M P.A.					Name							
611 NOR	Th wymore road, suite 219 Park Fl 32789		Street Address (P.			Box N	umber is Not Acceptable)	<u></u>	<u> </u>			
***************************************	74				City	FL Zip Code					е	
8. The above	named entity submits this statemen	t for the pu	rpose of changing its	register	ed office or	r registered a	igent, c	or both, in the State of Flori	da.			
SIGNATURE _	Signature, typed or printed name of registered ag	gent and title if	applicable. (NOTI	E: Registere	d Agent signati	ure required when	reinstatir	rg)	DATE			
					OW!!! FEE IS \$50.00 yable to Department of			2000040368621 -04/20/0101128012 ******50.00 ******50.00				
9.	MANAGING MEMBERS/MEMBERS			10.		P/ D   5		ADDITIONS/C		l oś	<b>767</b> 4 2400	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			Felix 1	Amor Ixr UA B	u tri Speedway Blu beach, Fl 32118	, d.	] Change	Addition	
TITLE NAME STREET ADDRESS	·		☐ Delete		ie Eet address					Change	Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			☐ Delete	TITL NAM STR						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	*		☐ Delete							Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		☐ Delete							Change	☐ Addition	
indicated	certify that the information supplied on this report is true and accurate a billity company or the receiver or true.  URE:	and that my	y signature shall have wered to execute this	the sam report a	e legal effe s required t	ect as if made by Chapter 6	e under 608, Flo	roath: that I am a managii	ng member o	that the in manage	nformation er of the	