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TO MAR 22 AM II: 33
SECTRE ARE OF STATE

COVER LETTER

FO: Registration Section

Division of Corporations				
SUBJECT:	MYKONOS I	NVESTMENTS, LLC		
SUBJECT		ited Liability Company		
The enclosed Ar	ticles of Amendment and fee(s) are su	bmitted for filing.		
Please return all	correspondence concerning this matte	er to the following:		
		REJEAN LAPIERRE		
	•	Name of Person		
	LAPIERRE	, BRAULT & ASSOCIATE	ES, INC	
		Firm/Company		
	7491 W OAKLAND PARK BLVD., STE 306			
		Address		
	LAUE	DERHILL, FLORIDA 3331	9	
		City/State and Zip Code		
	REJEAN	@LAPIERREBRAULT.C	OM _E .	
	•	(to be used for future annual report no	orincation)	
For further infor	mation concerning this matter, please	call:		
	REJEAN LAPIERRE	at (_954_)	749-8802	
	Name of Person	Area Code & Day	time Telephone Number	
Enclosed is a ch	eck for the following amount:			
₹ \$25.00 Filing	g Fee \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Sed) Certified Copy (additional copy is enclosed)	
Per.	MAILING ADDRESS: Registration Section Division of Corporations	Registration Sec Division of Cor	porations	
1 .	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive		

ARTICLES OF AMENDMENT TO

FILED

ARTICLES OF ORGANIZATION 10 MAR 22 AM II: 33

SECRETARY OF STATE TALLAHASSEE; FLORIDA-

MYKONOS INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	bility Company were filed on	09/03/2002	and assigned
Florida document number L020000227	741 .		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company her	<u>re</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		· · · · · · · · · · · · · · · · · · ·
	·		
Enter new mailing address, if applicable:	· · · · · ·		
(Mailing address MAY BE A POST OFFICE B	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offi		our records, enter th	ne name of the new
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	RAYMOND PARENT	7491 W OAKLAND PARK BLVD SUITE 306 LAUDERHILL, FLORIDA 33319	Add ☑ Remove				
MGR	JESSICA RICA SIBONY	16425 COLLINS AVENUE #1412 MIAMI, FL 33160	Add Remove				
			Add Remove				
			Add Remove				
		,	Add Remove				
<u></u>			Add Remove				
D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_				
			10 HAR SECRET				
			FILE 22 ARY ASSEI				
Dated	MARCH 17TH , 2010	<u>o </u>	AM II: 33 Of State				
	Signature of a member	authorized representative of a member	N				
JESSICA RICA SIBONY Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00