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SECRETARY OF STATE

C. LEWIS

JAN 1 0 2012

EXAMINER

TO: Registration Section Division of Corporations SUBJECT: Gaher Investments LLC Name of Limited Liability Company

Jonathan Garzon

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

		Name of Person			
	G	aher Investments LLC			
		Firm/Company			
	2700 Pinehurst Dr				
	V	Veston Florida 33332			
	City/State and Zip Code				
	jonath E-mail address: (nan@garzonservices.com to be used for future annual report notific	cation)		
For further information cor	neerning this matter, please of	eall:			
Jonat	han Garzon	at (_954_)	668-7040		
Name of I	Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the	following amount:				
\$25.00 Filing 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 & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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(<u>Name of the Limiter</u>	Gaher Invest Liability Compa A Florida Limited L	tments LLC ny as it now appea liability Company)	SECRET rs on our rebatds AHA	ARY DESTAIL SSEE, FLORIDA
The Articles of Organization for this Limited L Florida document numberL0300003	Liability Company			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>:e</u> :	
	N/A			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		2700 Pinehu	rst Dr	
(Principal office address MUST BE A STREET ADDRESS)		Weston Flori	da 33332	
Enter new mailing address, if applicable:		PO BOX 267	391	
(Mailing address MAY BE A POST OFFICE BOX)		Weston Flori	da 33326	
B. If amending the registered agent and registered agent and/or the new registered o			our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Florida street address		
		N/A	, Florida	N/A
		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</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A		Add Remove
	N/A		☐ Add ☐ Remove
	N/A		Add Remove
	ending any other information, en	nter change(s) here: (Attach additional sheets, if necessary.)	_
-		FALL A	2012 JAN
Dated	January 4th	, 2012	-9 PH
	Signature o	f a member or authorized representative of a member Crisanto Garzon	
	 	Typed or printed name of signee	

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Filing Fee: \$25.00