L040 VD0 12673

/Pe	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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B. KOHR
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EXAMINER



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COVER LETTER

TO:

Registration Section

Division of Corp	oorations		;	
SUBJECT:	EIFFEL TOWEI	R INVESTMENTS, L	.LC	
Sebuber.		ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are su	bmitted for filing.		
Please return all correspon	ndence concerning this matte	r to the following:		12 HJG 28 PH 12: 14
		ABBAS DATOO		
		Name of Person		28
	EIFFEL	TOWER INVESTMENTS	S, LLC	PH 12
		Firm/Company		
	740 PICKFAIR TERRACE			
		Address		
	L	AKE MARY, FL 32746		
		City/State and Zip Code		
	E-mail address:	to be used for future annual report	notification)	
For further information co	oncerning this matter, please	call:		
ABE	BAS DATOO	at (407)	562-6590	
Name of Person		Area Code & D	aytime Telephone Number	
Enclosed is a check for th	e following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is	
Registra Division P.O. Bo	NG ADDRESS: ation Section to of Corporations x 6327 ssee, FL 32314	Registration S Division of C Clifton Buildi	orporations ing ve Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

EIFFEL TOWER INVESTMENTS, LLC

(Name of the Limited I (A	Liability Company as it now appear: Florida Limited Liability Company)	s on our records.)	23		
The Articles of Organization for this Limited Lia Florida document number <u>L040000126</u>	• • • • • • • • • • • • • • • • • • • •	02/17/2004	and assisted		
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liability company here	<u>e</u> :			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compar	ny," the designation "I	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					
B. If amending the registered agent and/o registered agent and/or the new registered off		ur records, <u>enter 1</u>	he name of the new		
Name of New Registered Agent:	ABBAS DATOO				
New Registered Office Address:	New Registered Office Address: 740 PICKFAIR TERRACE				
	Ent	er Florida street ada	ress		
	LAKE MARY	, Florida	32746		
	City		Zip Code		
No. Designation of Assessed Assessed to Color and the Colo					

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 MGRM** DATOO, NASEEM 740 PICKFAIR TERRACE ☐ Add LAKE MARY, FL 32746 √ Remove DATOO, ABBAS MGRM 740 PICKFAIR TERRACE **✓** Add LAKE MARY FL 32746 Remove ☐ Add ☐ Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00