

604000066085

Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : PERLMAN YEVOLI AND ALBRIGHT PL
Account Number : I20040000167
Phone : (954) 566-7117
Fax Number : (954) 566-7115

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TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

TDH INVESTMENTS, LLC

T. CLINE

NOV 17, 2008

EXAMINER

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TDH Investments, LLC

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Laura Jacobson

(Name of Person)

Perlman, Yevoli & Albright, P.L.

(Firm/Company)

200 South Andrews Avenue, Suite 600

(Address)

Fl. Lauderdale, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Laura Jacobson

(Name of Person)

at (954) 566-7117

(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

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TALLAHASSEE, FLORIDA

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

TDH 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 Liability Company were filed on SEPTEMBER 8, 2004 and assigned
Florida document number L04000066085.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TDH 5530, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5420 NE 33RD AVENUE

FT. LAUDERDALE, FL 33308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5420 NE 33RD AVENUE

FT. LAUDERDALE, FL 33308

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

PERLMAN, YEVOLI & ALBRIGHT, P.L.

New Registered Office Address:

200 SOUTH ANDREWS AVENUE, SUITE 600

(Enter Florida street address)

FT. LAUDERDALE

(City)

Florida 33301

(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)

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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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 14, 2008



Signature of member or authorized representative of a member

EDWARD T. YEVOLI, Authorized Representative

Typed or printed name of signee

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Filing Fee: \$25.00

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