## L0400090712

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporati	ions
SUBJECT: EU	Name of Limited Liability Company
	dment and fee(s) are submitted for filing. e concerning this matter to the following:
Please return all correspondenc	
	CHARLOTTE DE WAAL_ Name of Person
	EU-US INVESTMENT, LLC Firm/Company
_	3451 BAYOU SOUND
_	LONGBOAT KEV FL 34228  City/State and Zip Code
<del></del>	E-mail address: (to be used for future annual report notification)
For further information concern	ning this matter, please call:
CHARLOTTE S	DE WAAL at (941) 383-2500  Area Code & Daytime Telephone Number
Enclosed is a check for the follower	owing amount:
\$25.00 Filing Fee	30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status  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

EU-US In	IVESTMENT,	110			
(Name of the Limited Liabili (A Florida	ty Company as it now appe a Limited Liability Company)	ars on our records.)			
The Articles of Organization for this Limited Liability Florida document number	· ·	12/15-200	∑ and assig	gned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	nited liability company be	ere:		•	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Comp	pany," the designation "L	LC" or the ab	breviation	
Enter new principal offices address, if applicable:			0	11.A10	
(Principal office address MUST BE A STREET ADD	PRESS)		ES ES	502	
			<u></u>	목록	
Enter new mailing address, if applicable:			2	JORPE FOR FOR	
(Mailing address MAY BE A POST OFFICE BOX)			_ t	AN AN	
			0	NO.	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on dress here:	our records, enter th	ne name of	the new	
Name of New Registered Agent:			<del> </del>	<del></del>	
New Registered Office Address:	P	El 11 de la III			
	Enter Florida street address				
	City	, Florida	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

<u>Title</u>	Name	Address	Type of Action
MGRM	CHARLOTTE DE WAA	BRADENTON, FL 34202	Add Remove
MCRM	MARIANNE DE WA	AL 4915 - 1ST. AVE E BRADENTON, FL 34208	Add Remove
Table 1 de la constitución de la			Add Remove
			Add Remove
			Add Remove
*****			Add Remove
D. If amend	ing any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	
	8/30 , zoo	29	
Dated	(2062)	r authorized representative of a member	
	CHARLOTTE DE	WAAL MEMBER	

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Filing Fee: \$25.00