# L050000310660

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

Division of Cor		•	
SUBJECT: JLE	INVESTMENT MAN	46ERS, LLC	
<del>\</del>	(Name of Limited	Liability Company)	
The enclosed Articles of	Amendment and fee(s) are submitte	d for filing.	
Please return all correspo	ndence concerning this matter to th	e following:	
	STEVEN B. KI	4 HN	
	(Na	ame of Person)	
	TLE GROUP,	LLC	<b>#</b> :0
	(F	irm/Company)	SECI
	2830 NE 29	th Street	97 JUL 25 SECRETAR ALLAHASS
		(Address)	——————————————————————————————————————
	Ft. Laule/Rule	2, FL 33309	AM 11: 35 SEE, FLORID
	(City/S	tate and Zip Code)	35 RIDA
For further information c	oncerning this matter, please call:		•
STEVEN B	KAHN of Person)	at (954) 566 - 9	1115
(Name	of Person)	(Area Code & Daytim	ne Telephone Number)
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	·	<b>]\$</b> 55.00 Filing Fee &	\$60.00 Filing Fee,
12 925.00 Tring I ve	Certificate of Status	Certified Copy (additional copy is enclosed)	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**

# JLE INVESTMENT MANAGERS, (Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on April 12, 2005 and assigned document number 40500003666	
SECOND:	This amendment is submitted to amend the following:	
	Change the name of the limited liability company	
	From "TLE INVESTMENT MANAGERS, LLC" to	
	"TLE GROUP, LLC".	
	Change the mailing allress and the street allress	
	Change the mailing allress and the street allress of the principal office of the limited liability company to 2830 NE 29th Street, Ft. LouderRale,	
	company to 2830 NE 29th Street, Ft. LoulerRale,	
	Florida 33306.	
	<b></b>	
	SEC!	-
J	JUL 25  AHASSEE  JUL 25	
Dated		m
	OF STATE FLORIDA	Ö
	Signature of a member or authorized representative of a member	
	Neil Ellman	
	Typed or printed name of signee	

Filing Fee: \$25.00