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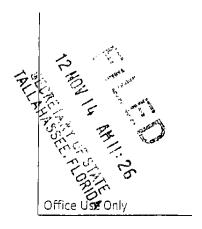
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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1.	bart	INVERTMENTS, LLC	L0500003696
	(CORPORATE N	AME)	(DOCUMENT #)
2.	(CORPORATE NA	AME)	(DOCUMENT#)
3.			
	(CORPORATE N)	AME)	(DOCUMENT#)
	_ _ Walk-In	Pick up time: Certifi	ed Copy Certificate Of Status
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Profit		[1] [[2] [[2] [[2] [[2] [[2] [[2] [[2] [Other Filings Annual Report
公司等等的			
Profit Non-P		Amendments	Annual Report Fictitious Name
Profit Non-P	Profit d Liability	Amendments Resignation	Annual Report Fictitious Name

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BART 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 L	iability Company	were filed on	04/14/2005	and assigned
Florida document number L0500003	6969			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company he	<u>re</u> :	
	BART INVEST	TORS, LLC		
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Comp	any," the designation "I	LC" or the abbreviatio
Enter new principal offices address, if applicable:		c/o 255 Alha	mbra Circle	
(Principal office address MUST BE A STREET ADDRESS)		Suite 500		
		Coral Gables	s, FL 33134	
Enter new mailing address, if applicable:		<u>c/o 255 Alha</u> i	mbra Circle	
(Mailing address MAY BE A POST OFFICE BOX)		Suite 500		
		Coral Gables	s, FL 33134	
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 nev
Name of New Registered Agent:	ARAGON REGISTERED AGENTS, INC.			
New Registered Office Address:	255 Alhamb	ora Circle Suite	500	
		Enter Florida street address		
	C	oral Gables	, Florida	33134
		City		Zip Code
Now Designational Associate Clampions (Colorador)	Danistanad A manta			

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
MGR	MIGUEL A. RODRIGUEZ	c/o 255 Alhambra Circle Suite 500 Coral Gables, FL 33134	
4			Add Remove
			Add Remove
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
	2 20		- -
Dated	Overneer / , 200 Signature of projection	or authorized representative of a member	
		EL A. RODRIGUEZ	
		or printed name of signee	

Page 2 of 2

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