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EXAMINER



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SECRETARY OF STATE OF STATE OF STATE OF CORPERSATION

COVER LETTER

• • •
TO: Registration Section Division of Corporations
SUBJECT: FOUNTain 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:
George Befeler, Esq. (Name of Person) Homer Bonner 1200 Four Seasons Tower 1441 Brickell Avenue (Address) Miami, Florida 33131 (City/State and Zip Code)
For further information concerning this matter, please call:
George Befeler at 305 350-5159 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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



Fountain 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 4/27/2005 and assigned orida document number and assigned
is amendment is submitted to amend the following:
If amending name, enter the new name of the limited liability company here:
e new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation L.C." If amending the registered agent and/or registered office address on our records, enter the name of the new gistered agent and/or the new registered office address here:
Name of New Registered Agent: New Registered Office Address:
(Enter Florida street address)
, Florida
(City) (Zip Code)
w Registered Agent's Signature, if changing Registered Agent:

(If Changing Registered Agent, Signature of New 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 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

Title <u>Name</u> Address Type of Action Nancy Ortiz (TBE David ortiz) Roual Palm Bivd TV Add David Ortiz MGRM (TBE Mancy Ortiz) 17160 Royal Palm Blvcl ☑ Add Remove ∏Add Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a hember or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00