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SECRETARY OF STATE

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COVER LETTER

TO: Registration Sect Division of Corpo					
SUBJECT:	ock Invi	ESSMEWS, LLC. ited Liability Company)			
4	(Name of Lim	ited Liability Company)			
i					
The enclosed Articles of Ar	mendment and fee(s) are sul	omitted for filing.			
Piease return all correspond	lence concerning this matter	to the following:			
	LONAL	(Name of Person)			
		(Name of Person)			
	Dock	INVESSMENTS, 2 (Firm/Company)	LC.		
		(Firm/Company)			
	7625 M	(Address) (Address) (FL 34243			
		(Address)			
	SARASO	JA, FL 34243			
		(City/State and Zip Code)			
For further information con	cerning this matter, please o	all:		0	
0			ALL SEC	08 JAN 10 AM 10: 3	
10 ms 200	s, Dubsh	at (941) 228-9 (Area Code & Daytime 7	· 988	Z	
(Name of I	Person)	(Area Code & Daytime 7	Telephone Number)	0	
	•		<u> </u>	7	Ö
Enclosed is a check for the	following amount:		CS4 CS4 S4S	⇔	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enco		

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

7

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited L	INUESTNERS, LLC. Iability Company as it now appears on our records lorida Limited Liability Company))				
The Articles of Organization for this Limited Liab Florida document number \(\sum 050000 \)	oility Company were filed on 07/05/2	oo5 and assigned				
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of the limited liability company here: BALLEYS INVESTMENT GROUP, LLC. The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation						
"L.L.C."	are words. Emirica English, company, and according	TALL SE				
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>en</u> ce <u>address here</u> :	ter the name of the new CFR OF STILED				
Name of New Registered Agent:		ORDE 3:				
New Registered Office Address:	(Enter Florida street address)					
	, Florida					
	(City)	(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 MGRM = Managing Member Type of Action Title Name <u>Address</u> ☐ Add Remove Add Remove Add Remove Add Remove N 10 AM 10: 31 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member RONA LD 5. DUBYN Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00