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SECRETARY OF STATE
DIVISION OF CORPORATION



COVER LETTER

TO: Registration Division of C	Section Corporations		
SUBJECT: BK	O FLORIDA INVESTMENTS (Name of L	S, LLC. imited Liability Company)	
	of Amendment and fee(s) are su spondence concerning this matte		
-	KRISTINE A. CLOBES	(Name of Person)	
-		(Firm/Company)	
-	2420 NE 8th TERRACE	(Address)	SECRETARY DIVISION OF US 2006 JUL -6
-	POMPANO BEACH, FL (City	33064 //State and Zip Code)	L-6 PM
For further informatio	n concerning this matter, please	call:	RATIONS H 4: 29
KRIST	(Name of Person)	at (<u>954</u>) <u>448-5-</u> (Area Code & Daytim	489
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & 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

	(Present Name) (A Florida Limited Liability Company)	
	(A Florida Limited Liability Company)	
FIRST:	The Articles of Organization were filed on <u>08/19/2005</u> and assigned document number <u>L05000082344</u> .	
SECOND:	This amendment is submitted to amend the following:	
	Article II - Principal Office and Mailing Address for LLC is 2420 NE 8th Terrace, Pompano Beach, FL 33064.	_
	Article IV - Name and Address of the Registered Agent is Kristine A. Clobes 2420 NE 8th Terrace, Pompano Beach, F	<u>L 33</u> 064.
	Article V - Manager / Member Detail :	
	Name and address of Managing Member is Kristine A. Clobes 2420 NE 8th Terrace, Pompano Beach, FL 33064.	
	Name and address of Manager is Derek A. Clobes 795 SE Forgal Street, Port St Lucie, FL 34983.	<u> </u>
		<u> </u>
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•		– 2 0
		DIVISION I
Dated	July 5th2006	of an
		OF STATE DEFORATIONS
		STATE
	Kristine a. Clobes	59
	Signature of a member or authorized representative of a member	•
	Kristina A. Clahaa	
	Kristine A. Clobes Typed or printed name of signee	1

Filing Fee: \$25.00

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 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.

(Signature of Registered Agent)

2006 HILLS BY 1: 20