## L05000103345

····	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	WAIT MAIL			
<u> </u>	(Business Entity Name)			
(Document Number)				
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SECRETARY OF STATE
TABLAHASSEEF FLORIDA

J. SAULSBERRY EXAMINER

JUN 23 2011

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## **COVER LETTER**

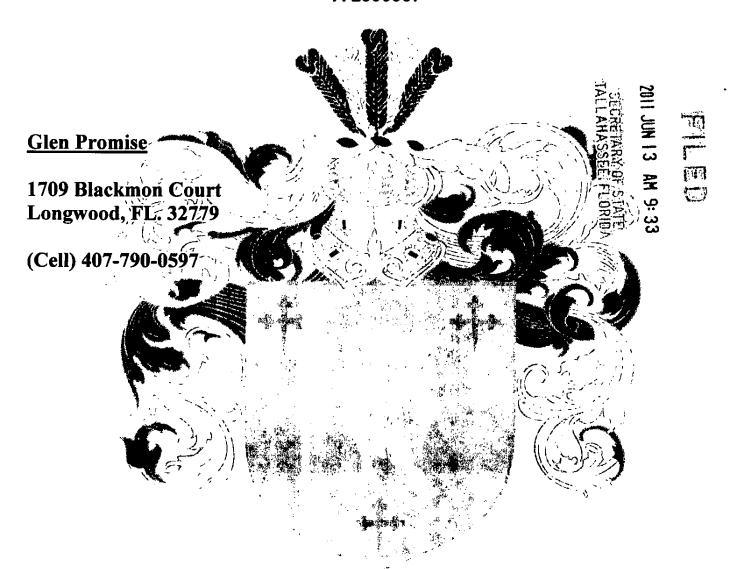
TO: Registration : Division of Co	Section orporations		·		
SUBJECT: Pr	omise Investig	etions L.L.C. ited Liability Company	· ·		
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	pondence concerning this matter	r to the following:			
	_	Name of Person  Nucestiga tions  Firm Company			
	1709 Black Longwood, F			2011 JUN 13	
	GPromise 007	O Gnail Cam		21 DY	(T
For further information	E-mail address: ( concerning this matter, please of	to be used for future annual report notifica	ation)	JN 13 AM 9: 33 ETARYOF STATE HASSEE FLORINA	
Glen Pom Name	of Person	at ( <u>407) 790 - 05</u> Area Code & Daytime T		-	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fer Certificate of S Certified Copy (additional copy	tatus &	i)
MAII	LING ADDRESS:	STREET/COURIE	R ADDRESS:		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



## PROMISE INVESTIGATIONS, LLC A 2500367



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Promise Investigation	NS L.L.C.
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) lability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>LO 5000 (0 3 3 4 6</u> .	were filed on $10/19/2005$ and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	With company here:
The new name must be distinguishable and end with the words "Limi"L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 160487 Altamonte Springs, Fl. 32714
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, <u>enter the name of the new</u> e:
Name of New Registered Agent: 61em	Promise
New Registered Office Address: 1709	IS/CC/Cm on C  Enter Florida street address
Longe	Blackon on Ci. Enter Florida street address  City Florida 32779  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							
<u>Title</u>	Name	Address	Type of Action				
MAR (VP)	Tim Suyer	3100 McCANN ROAD # 2306	Add Remove				
UP mer	Matthew Rose	Longuicu , +X. 75605  1355 Venezia Court # 403  Champions GATE, FL. 33896	Add Remove				
			Add Remove				
			Add Remove				
			Add Remove				
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	FILE L				
Dated	Signature of a member of a mem	2011.  Per or authorized representative of a member 2008.  do or printed name of signee	9: 33 				

Page 2 of 2

Filing Fee: \$25.00