L06000012242

(Re	questor's Name)	
(Ad	dress)	
(Ád	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800294897238

02/03/17--01017--012 **30.00

IN SER -3 P 4 39
ECHEVASSE FLORMA

 ${\bf f}_{\cdot}$

S Warren FEB 0 6 2017

COVER LETTER

TO: Registration So Division of Con		
	VESTMENTS, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all correspo	condence concerning this matter to the following:	
	REYNALDO ORTEGA	
	Name of Person	
	E & M INVESTMENTS, LLC	
	Firm/Company	
	3602 SW 166 AVE	
	Address	
	MIRAMAR, FL 33027	
	City/State and Zip Code	
	REYORTEGA36@GMAIL.COM E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please call:	
REYNALDO ORTEGA	A 786 356-9491at () of Person Area Code Daytime Telephone Number	
Name	of Person Area Code Dayunie Telephone Number	
Enclosed is a check for t	the following amount:	
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status Certified Copy Certificate of (additional copy is enclosed) Certified Copy (additional copy is enclosed)	f Status & py

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

(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on or imited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Co Florida document number L06000012242	mpany were filed on $\frac{2/2/2006}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addre		records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
		, Florida Zip Code
	•	Zip Code
New Registered Agent's Signature, if changing Registered		

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 605, 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
Page 1 of 3

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BARBARA IRIS ORTEGA	3602 SW 166 AVE, MIRAMAR,	■ Add
		FL 33027	Remove
			☐ Change
			Remove
			Change
			□ Add
			Remove
			☐ Change
			□ Add
			□ Remove
			□ Change
		*****	Add
		5 10 10 10 10 10 10 10 10 10 10 10 10 10	Remove Change
		THE FLORIDA	A TO A
		•	
		, ,	□ Change

•				
			·······	
				-
				
				
	· · · · · · · · · · · · · · · · · · ·		 	
ctive date, if other than the defective date is listed, the date must be: If the date inserted in this blocument's effective date on the Dep	ck does not meet the applic	able statutory filing requ	(optiona an 90 days after tilin tirements, this da	al) ng.) Pursuant to 605 te will not be list
	offactive data, but no	t an effective time,	at 12:01 a.m	n. on the earli
		·		
record specifies a delayed ne 90th day after the reco		,		
ne 90th day after the reco	ord is filed.	 _ _		
ne 90th day after the reco	erd is filed.	·	nember	
ne 90th day after the reco	ord is filed.	·	5783	- T
ne 90th day after the reco	y 2017 , 2017 Signature of a member or author	·	nember	en T

Filing Fee: \$25.00