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EXAMINER



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SECRETARY OF STATE PALL'AHASSEE, FLORIDA

11 APR-4 PM 1:43

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	Banga Inv	restments R, LLC				
SUBJECT:		ited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.				
Please return all corres	condence concerning this matter	r to the following:				
		Garry G. Banks Name of Person				
	Banga Investments R, LLC					
	Firm/Company					
	8371 Miranda Street Address					
	Navarre. FL 32566					
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code				
	dr1gator E-mail address: (@yahoo.com vbre@att.ne to be used for future annual report notifi	cation)			
For further information	concerning this matter, please of	call:				
	arry G. Banks		865-6570			
Name	of Person	Area Code & Daytime	e Telephone Number			
Enclosed is a check for	the following amount:					
\$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 enclosed)			
Regis Divis P.O. Talla	tration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURI Registration Section Division of Corporn Clifton Building 2661 Executive Ce Tallahassee, FL 32.	n ations nter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Banga Investment	SR, LLC	
(Name of the Limited Liability Comps (A Florida Limited	ny as it now appears on our a Liability Company)	records.)
The Articles of Organization for this Limited Liability Company	were filed on03/13	3/2006 and assigned
Florida document numberL06000026796		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	ility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the de	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		ACC 1
		78 7 1
		ASS.
Enter new mailing address, if applicable:		ARY OF S
		-11
(Mailing address MAY BE A POST OFFICE BOX)		FLORID.
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	a street adåress
		Florida
	€'itv	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

Address Type of Action Name MGRM Bridgette M. Tolbert 8371 Miranda Street ✓ Add Navarre FL 32566 Remove Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Adding Bridgette M. Tolbert as a managing member Signature of a member or authorized representative of a member Garry G. Banks Bridgette M. Tolbert Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00