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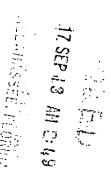
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Cor	porations		
Mountain I SUBJECT:	nvestors, LLC		
	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Michael A Cook		
		Name of Person	······································
	Mountain Investors, LLC		
		Firm/Company	
	47 Four Corners Rd		
		Address	
	Blairtsown, NJ 07825		
		City/State and Zip Code	
	mike48cook@gmail.com		····
		to be used for future annual report notifi	cation)
For further information e	oncerning this matter, please ca	ail:	
Mike Cook		973 2221601 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee .	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Cony (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Mountain Investors, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/18/2006 and assigned Florida document number 60001240 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Ron DeCorte Enter new mailing address, if applicable: 3901 Stoneshire Ct (Mailing address MAY BE A POST OFFICE BOX) Fort Worth, TX 76179-2516 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City

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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ron DeCorte	3901 Stoneshire Ct	
fle1se	e include him on 111	Fort Worth, TX 76179-2516	□ Remove
EMBILS CURREN MIKUK	As well As the A FIMILIAN AS THE COOK & GMAIL COM	EMAIL: Ron Decerte @ ATT, No.1	Change
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			□ Remove
			☐ Change
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Filing Fee: \$25.00