LD7000004850

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(Ad	idress)	
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C. LEWIS NOV 2 9 2012 EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

Nebraska Investments I LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gillian Hall

Name of Person

Nebraska Investments I, LLC

Firm/Company

114 Melton Avenue

Address

Sebastian, FL 32958

City/State and Zip Code

ghallsebastian@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gillian Hall

772,581 2694

Name of Person

Area Code & Daytime 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)

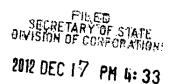
□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



Nebraska Investments LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Florida Chillea I	Statistics Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L07000004850</u> .	were filed on 01/16/2007	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Nebraska Investments I LLC			
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designa	ation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	new principal offices address, if applicable: 114 Melton Avenue		
(Principal office address MUST BE A STREET ADDRESS)	Sebastian, FL 32958		
Enter new mailing address, if applicable:	PO Box 702036		
(Mailing address MAY BE A POST OFFICE BOX)	Wabasso, FL 32970		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	· •	eet address ida	
·	City	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 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 **Title** Name <u>Address</u> **Type of Action** Add Remove

D If amend	ing any other info	rmation, enter change(s) here: (Attach ad	ditional sheets, if necessary.) IFVISION	TARY OF STATE
			,2012 DEC	17 PM 4: 33
			, , , , , , , , , , , , , , , , , , ,	
Dated		*		
	Gillian Hall	Signature of a member or authorized represen	tative of a member	
		ped or printed name of sign	nee	

Page 3 of 3

Filing Fee: \$25.00