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COVER LETTER

TO: Registration Section Division of Corporation	ons ·			
SUBJECT: Six Oaks Inve	stments, LLC			
	(Name of Limited Liability Company)			
The enclosed Articles of Amend	lment and fee(s) are submitted for filing.			
Please return all correspondence	concerning this matter to the following:			
Roc	dney E. Reams			
	(Name of Person)			
Reams and Reams CPA's				
	(Firm/Company)			
2019 Centre Point Blvd Suite 102				
	(Address)			
Tal	llahassee, Florida 32308			
	(City/State and Zip Code)			
For further information concerni	ing this matter, please call:			
Rodney E. Reams	at (850) 325-6476			
(Name of Person	n) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the follow	wing amount:			
	30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			
MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection Registration Section prporations Division of Corporations Clifton Building			

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRLIARY OF STATE
TALLAHASSEE, FLORIDA

Six Oaks Investments LLC	2		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our r da Limited Liability Company)	ecoras.)	
The Articles of Organization for this Limited Liability	y Company were filed on 1/16/2007	and assigned	
Florida document number <u>L0700005264</u>	<u></u> -		
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the de	esignation "LLC" or the abbreviation	
B. If amending the registered agent and/or reqregistered agent and/or the new registered office a Name of New Registered Agent: New Registered Office Address:		'ds, enter the name of the new	
	(Enter Florida street address)		
·		, Florida (City) (Zip Code)	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	ent and agree to act in this capacity. It and complete performance of my du It agent as provided for in Chapter 60 vered office address, I hereby confirm	ties, and I am familiar with and 18, F.S. Or, if this document is	
	(If Changing Decletowed Agent Signat	ure of New Registered Agent)	